

**Status of compliance of Mamelodi ECD centres to the city of  
Tshwane ECD funding strategy: A social work perspective**

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## DECLARATION

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I declare that the above dissertation is my own work and that all the sources that I have used or quoted have been indicated and acknowledged by means of complete references.

I further declare that I submitted the dissertation to originality checking software and that it falls within the accepted requirements for originality.

I further declare that I have not previously submitted this work, or part of it, for examination at Unisa for another qualification or at any other higher education institution.



24/09/2019

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SIGNATURE

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DATE

## **ACKNOWLEDGEMENTS**

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It was a long and hard road, with several obstacles on the way. It is through God's grace, mercy and guidance that enabled me to walk the knowledge path.

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## **DEDICATION**

I dedicate this project to my Lord Jesus Christ, my strong pillar, my source of inspiration, wisdom, knowledge and understanding. He has been the source of my strength throughout this program and on His wings only have I soared.

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## **ABSTRACT**

Early childhood development centres play a major role in supporting the development of children from zero to six years. For sustainability and strengthening ECD Centres funding is provided by government departments, municipalities and the private sector. The City of Tshwane is funding a number of ECD centres in Mamelodi. The CoT has clear guidelines, policies and procedures outlined in the funding strategy. The challenge faced by the CoT is the compliance and accountability of the funded ECD centres.

Utilizing the qualitative approach, this study communicates the challenges faced by the eight Mamelodi ECD centres in keeping to the allocated line items outlined by the CoT funding strategy. The study describes the status of compliance of these centres. It further outlines the CoT funding processes, the ECD managers' understanding, concerns and reasons behind the lack of compliance. Based on the findings, the study makes recommendations for practice, policy and further research studies.

## **KEY CONCEPTS**

- Early Childhood development (ECD)
- ECD Funding
- Status of funding
- ECD Centres;
- Funding compliance
- ECD managers
- ECD policy
- Funding policy
- ECD Role players
- Sustainability

## **LIST OF ACRONYMS**

<b>ADEA</b>	Association for the Development of Education in Africa
<b>ADEA-MINEDAF</b>	Association for the Development of Education in Africa – Ministers of Education of African
<b>ADEA-WGECD</b>	Association for the Development of Education in Africa- Working Group on Early Childhood Development
<b>ANC</b>	African National Congress
<b>BMW</b>	Bavarian Motor Works
<b>CDG</b>	Care Dependency Grant
<b>CoGTA</b>	Corporate Governance and Traditional Affairs
<b>CoT</b>	City of Tshwane
<b>CRC</b>	Convention on the Rights of a Child
<b>CWP</b>	Community Works Programme
<b>DA</b>	Democratic Alliance
<b>DBE</b>	Department of Basic Education
<b>DPME</b>	Department of Planning, Monitoring and Evaluation
<b>DSD</b>	Department of Social Development
<b>ECD</b>	Early Childhood Development
<b>ECDNA</b>	Early Childhood Development Network in Africa
<b>EFF</b>	Economic Freedom Fighters
<b>EPWP</b>	Expanded Public Works Programme
<b>ESF</b>	Education Sector Framework
<b>HSD</b>	Head of social development
<b>HSRC</b>	Human Sciences Research Council
<b>IDT</b>	Independent Development Trust
<b>MDGs</b>	Millennium Development Goals
<b>MEC</b>	Member of the Executive Committee
<b>MFMA</b>	Municipal Finance Management Act
<b>NCPR</b>	National Child Protection Register
<b>NDP</b>	National Development Plan
<b>NDP</b>	National Development Plan

<b>NEPAD</b>	New Partnership for Africa's Development
<b>NGOs</b>	Non-Governmental Organisations
<b>NIP</b>	National Integrated Plan
<b>NIPECD</b>	National Integrated Plan on ECD 2005-2010
<b>NPC</b>	National Planning Commission
<b>NPO</b>	Non-Profit Organisation
<b>NQF</b>	National Qualification Framework
<b>NRSO</b>	National Register for Sex Offenders
<b>OAU</b>	Organization of African Unity
<b>RSA</b>	Republic of South Africa
<b>SACMEQ</b>	Southern and Eastern African Consortium for Monitoring Educational Quality
<b>SAQA</b>	South African Qualifications Authority
<b>StatsSA</b>	Statistics South Africa
<b>UNESCO</b>	United Nations Educational, Scientific and Cultural Organization
<b>UNICEF</b>	United Nations International Children's Emergency Fund
<b>UNISA</b>	University of South Africa



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# **CHAPTER ONE: GENERAL ORIENTATION OF THE STUDY**

## **1.1. Introduction**

This chapter provides an overview of the research process relative to the status of compliance on Mamelodi Early Child development (ECD) Centre to the City of Tshwane (CoT) ECD funding strategy. The background, problem statement, motivation for the study, a brief outline of the research methodology, the key concepts for this study and the structure of the research report are covered in this chapter

## **1.2. Background of the Study**

Early child development has become an important aspect of society as child-focused approaches are being developed and strengthened. This is confirmed by Berry, Dawes and Biersterker (2013:26) who state that the acknowledgement of the significance of Early Child Development (ECD) corresponds with a development of the body of scientific evidence that supports the prominence of the first years of human life. Funding for ECD has become one of the critical aspects in the development arena as different government departments and the private sector community look at the best ways to fund ECD Programmes. For example, in South Africa, there are corporate business sectors, such as BMW and the University of South Africa (UNISA), that establish ECD centres within the work environment. These centres support families as part of corporate investment. However, efforts to strengthen the development of ECD centres are being undermined by the lack of compliance of centres to the ECD funding strategy, which inadvertently leads to the revoking of funding (Berry, Jamieson & James, 2011:17).

Globally, issues of “children and development” have received increased attention (Kamerman, 2006:17). Firstly, this is in a bid to accord children their rights to survival, development, protection and education (Biersterker, 2012:52). Secondly, it is in acknowledgement of the pivotal role played by children in building sound societies (Biersterker, 2012:52; UNESCO, 2010: 19-24). During this time, children develop essential competencies and skills in every area of cognitive, emotional, social, moral and psychological development (World Bank, 2010:1).

The world-renowned economist and 2000 Nobel Laureate in Economic Sciences, James Heckman, clearly demonstrates the positive impact of early childhood education. His research demonstrates that, “Every dollar spent on early childhood education can yield tremendous returns over the life of a child” (Heckman & Masterov, 2007:33). His calculations predict that, if “\$8,000 (approximately R112 000) is invested in early childhood education at birth for a child who lives to be sixty-five, the return on investment would be \$650,000 (approximately R9 100 000)”, which is more than eighty times the initial investment (Heckman & Masterov, 2007:33). Elsewhere, Heckman (2004:2) states, “The real question is how to use available funds wisely. The best evidence supports the policy prescription: invest in the very young and improve learning and socialisation skills”. It is, therefore, evident that a short term investment in ECD leads to long term academic and social benefits.

The government of South Africa has demonstrated a commitment to the prioritisation of children’s issues, including access to ECD services (UNICEF, 2008:13). This is demonstrated by its acknowledgement of children’s rights in its Constitution and its ratification of international and regional statutes that are pro-children. Moreover, these commitments are reflected in the domestic law, for example, the Children’s Act 38 of 2005 and the ECD policy (Department of Social Development, 2015:9). The Children’s Act provides a strong focus on ECD through an entire chapter (Chapter 6) that is dedicated to ECD. Moreover, the Children’s Act offers a framework to direct stakeholders involved in the care, development and protection of children, in order to promote the well-being of children.

Furthermore, the Children’s Act provides norms and standards for ECD centres. Compliance with these norms and standards is a requirement for ECD facilities to be registered and to access funding. It is imperative to note that provisioning clauses for some services in the Children’s Act state that the Social Development Member of the Executive Committee (MEC) “must” provide and fund services. However, the provisioning clauses for ECD centres state that the Social Development MEC “may” provide ECD services. The practice, therefore, is that ECD centres have to find alternative ways of raising funds, for instance by introducing user fees and levies, seeking sponsorship from

well-wishers and philanthropists, charging fees and organising events aimed at raising funds. This point is also noted by Berry, Jamieson and James (2011:34), who state that MECs can decide not to fund ECD services at all, or to fund them only partly. Although the Department of Social Development (DSD) is under no obligation to fund ECD services since they fall into the “May fund” and not on the “Must fund” category. However, the Act directs that ECD services should be a priority in the previously disadvantaged communities. This, therefore, places a legal mandate and imperative on the state to fund ECD services in townships, such as Mamelodi.

In Mamelodi, the ECD centres normally operate in churches and back yards. They receive a funding from the City of Tshwane as a granting aid that is not more than R100 000. The funding is aimed at sustaining the ECD centres as the children come from poverty-stricken communities of Mamelodi. Some of these ECD centres are found in the informal settlements in order to give access to education for those children that come from low income or no income homes. This granting aid should cover food, educational material and educational toys. Even though a few of the ECDs take babies, most of them register children from 3 to 6 years of age. The ECD programme comes from the concept of balancing the imbalances of the past apartheid system and so it has political influence. The initiative was facilitated by ANC councillors from the wards of the City of Tshwane who are the decision-makers. The administration is facilitated by the Department of Social Development (DSD) at CoT which consists of the director of community development and a team of social workers who are working with children.

The Department of Social Development within the CoT normally conducts meetings with the social workers who are involved in planning. Just after planning, the granting aid would be advertised in the community Imbizo's all over the city. Then the candidates are recruited. The criteria of recruitment involve the councillors in order to make sure that all wards are included in the process. Some ECDs get motivation letters from their respective councillors to be included, based on their backgrounds. This process becomes very frustrating to the social workers involved owing to political interference where some ECDs are included even when they do not meet the funding criteria. This

process is sometimes unjust as some ECD centres would bend backwards to please the ward councillors to motivate their inclusion.

As one of the significant stakeholders in the arena of ECD, the CoT drafted the ECD funding strategy document of 2006/07. During the 2006/07 financial year, R15 million was allocated for the funding of ECD centres in Tshwane (CoT, 2008:8). The principal aim of this funding was to assist ECD centres to improve services for children and to ensure that the teachers and caregivers are trained in relevant skills. Systems and processes for disbursing the money were put in place (CoT, 2008:8). It should be noted that the provision of financial support to service providers through a funding strategy is essential to promote efficient, effective, quality and transformed services, targeted at the vulnerable and previously disadvantaged members of the society, including children.

### **1.3. Problem Statement**

A research problem is the replication of an unstructured thought, a conjecture, a question or a cognitive representation of some real world phenomena (Mouton, 2006:65). Leedy and Ormrod (2013:124) state that all scientific studies should begin with the identification and flawless construction of a research problem. This view is supported by Fouché and De Vos (in De Vos, Strydom, Fouché & Delpont, 2011:100), who state that it is imperative to pinpoint a specific problem as soon as a topic has been identified. In a similar vein, Welman, Kruger and Mitchell (2005:17) are of the view that a problem statement is “some difficulty, which the researcher experiences in the context of either a theoretical or a practical situation and to which she wants to obtain a solution”.

A problem statement is a short paragraph in which the knowledge gap is concisely stated. In other words, the extent and impact of the research problem is summarised, followed by a motivation as to why the proposed investigation is needed.

Approximately a third of South Africa's children aged 0-4 years are currently exposed to early learning opportunities in ECD centres (Republic of South Africa [RSA], 2008:13). Most studies conducted in the field of ECD show that ECD centres experience a plethora of challenges in rendering ECD services and in complying with the DSD ECD funding strategy (Berry *et al.*, 2011). Furthermore, current registration requirements are gigantic,



lengthy, and complex and complicated, resulting in prejudice and the disadvantage for community-based ECD centres with lower management capacity (Van den Berg, Williams & Burger, 2010). Van den Berg *et al.* (2010) note that “Seventy-five percent of ECD facilities find it difficult to apply for funding.”

The complexity of administering and managing ECD funding strategy challenges every effort put in place for the sustainability of the ECD centres. Status of compliance by the centres makes it difficult to achieve the intended goals of the strategy. ECD centres are also frustrated as they find it very difficult to identify the pitfalls for not adapting to the requirements.

The City of Tshwane’s aim is to address the marginalization of the ECD centres in disadvantaged communities within the city. The CoT funding strategy has appropriate policies, strategies, and initiatives to address and guarantee the holistic needs of children within the CoT. Compliance with the funding requirements continues to be a challenge for a number of ECD centres in Mamelodi

The problem statement for this study is as follows:

No research had been undertaken to explore and describe the status of compliance by Mamelodi ECD centres to the CoT ECD funding strategy. The study, therefore, explores and describes the status of compliance and makes recommendations to address challenges related to compliance with the CoT ECD funding strategy.

#### **1.4. Rationale for the Study**

The researcher’s interest in the study came from her observation of the plight and ordeal of Mamelodi ECD centres that fail to comply with the CoT ECD funding strategy. Interest was generated from experience gained from working in the CoT which has cultivated her passion for the general well-being of ECD learners and for the improvement of the conditions of ECD centres.

According to Creswell (2007:5), a rationale for the study denotes the researcher’s motive and curiosity with regard to conducting an inquiry. Fouché and Delport (as cited in De

Vos *et al.*, 2011:101) state that this interest should be derived from day-to-day happenings and transactions in the work environment which leads to the basic knowledge and experience of the phenomenon under study. This line of thought is further supported by Vithal and Jansen (2004), in Maree (2007:28), who state that the rationale functions as an explanation of how the researcher developed an interest in a specific topic.

The rationale indicates why the study is worth undertaking. It indicates the context of the study which includes the conditions that motivated the investigator to suggest the research study. The rationale for the study also discusses the prominence, importance, validation and influence that the proposed study will make in terms of current knowledge around the issue or problem that is being researched.

From practical experience of monitoring ECD centres in Mamelodi, the researcher noticed that principals of ECD facilities find it extremely challenging to comply with the CoT ECD funding strategy. At times it was suspected that the funding requirements were too enormous and too rigid for the kind of target group. There was also a lack of political and administrative will on the side of the CoT to engage the ECD practitioners in order to understand the reasons for the lack of compliance. Such an engagement could have culminated in an acquisition of suggestions regarding what should be changed in order for ECD practitioners to be in a position to comply.

In view of the above-mentioned, the researcher developed a deeper understanding of the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. This was inspired by the above problem formulation. As an outcome, it was envisaged that the study would propose recommendations to address matters of compliance with the CoT ECD funding strategy in a bid to avert the cutting of the granting aid of the Mamelodi ECD centres owing to non-compliance. The revoking of funding has severe consequences for the ECD centres, children and their parents. Research conducted by the Southern and Eastern African Consortium for Monitoring Educational Quality (SACMEQ) concluded that, "Children who attended ECD centres had higher scores in reading and mathematics at Grade 3" (Moloi & Chetty, 2011).

### **1.5. Research Question**

According to Bell (2005:32), research questions emerge from the research topic and the research problem. Badenhorst (2007:25) states that a research question indicates the scope to be covered by the research project.

An important rule when formulating a research question is that it should be specific and focused. Such a research question is easier to answer than a question that is general and unfocused (Bless, Smith & Sithole, 2013:71). Kumar (2005:192) proposes that a research question must focus on matters connecting to its central theme and recognize the key gaps in the current body of information. The research question is generally a reflection of one main problem statement. It captures the problem statement in a single question that is well demarcated and focused.

In this study, the issue was around the status of compliance of Mamelodi ECD centres with the CoT ECD Funding Strategy. As such, the research question that is answered in the study is as follows: What is the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy?

### **1.6. Research Goal**

According to Weinbach (2007:128), a goal is a declaration of the researcher's intentions. Fouche and De Vos (as cited in De Vos *et al.*, 2011:104) state that the terms "aim", "purpose" and "goal" are synonyms, and they explain them as follows: "Their meaning applies the broader, more abstract conception of the end towards which effort or ambition is directed." Grove, Burns and Gray (2013:74) note that a research goal is a clear statement of a specific purpose of the study.

The goal states what is expected to be achieved by the study in general terms. It correlates closely with the title of the study, and it stipulates what will be undertaken, who the units of analysis are, and the geographical area covered by the research.

The goal of this study was: To develop an in-depth understanding of the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy.

### **1.7. Research Objectives**

The objectives are directly derived from the goal of the study. Weinbach (2007:31) defines objectives as “measures possible to determine to what degree a goal has been accomplished and often includes time and deadlines for accomplishment”. Babbie (2009:33) is of the view that research objectives inform the researcher about what exactly should be investigated. According to Fouche and De Vos (in De Vos *et al.*, 2011:104), an objective is a concrete, measurable and speedily attainable commencement of the end towards which the ambition is directed. The authors further state that, “Whereas a goal is ‘the dream’, objectives are the steps one takes, one by one, realistically at grass-roots level, within a certain time span, in order to attain the dream” (Fouche & De Vos, in De Vos *et al.*, 2011:104).

Generally, objectives are deconstructed, smaller, logically connected parts, which are systematically stated to address the various aspects of the study. Objectives should focus the study and demarcate its boundaries. In addition, objectives must follow one another in a logical sequence.

The overall research objectives for this study were:

- To explore the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs.
- To describe the findings regarding the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs.

The task objective for this study was divided as follows:

- To obtain a sample consisting of principals of ECD centres in Mamelodi that have received funding from the City of Tshwane (CoT) in the past seven years;
- To conduct semi-structured interviews facilitated by open-ended questions contained in an interview-guide with principals to collect data about the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs;

- To transcribe, sift, sort and analyse the data collected, utilising Tesch's eight steps for qualitative data analysis as mentioned in Creswell (2013);
- To interpret the data and conduct a literature control to support / confirm and/or contrast the themes and the storylines of the research findings; and
- To draw conclusions and make recommendations regarding the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

### **1.8. Research Methodology**

A detailed description of the research methodology, including the research approach, type of research, research design, and methodology, as well as the measures that were taken to ensure the trustworthiness of the data, will be presented in Chapter 3. The following discussion is a brief overview of the research methodology utilised for the study.

In this study, the researcher utilised a qualitative approach. There was no significant information on the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. As such, this is a topic which required an in-depth exploration. The qualitative approach was, therefore, the most appropriate approach for the study. A qualitative approach is more concerned with the "what" questions, which is exactly what this study sought to answer (Fouché & De Vos, in De Vos *et al.*, 2011:95). In addition, the researcher intended to acquire an understanding of the reasons and not to explain them; this was best fulfilled within a qualitative approach (Fouché & Delport, in De Vos *et al.*, 2011:65).

Explorative, descriptive and contextual research designs were used for the study to explore the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. The researcher also employed the descriptive research design towards describing the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi. The researcher further employed a contextual research design to contextualise the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

The population for this study consisted of all principals of all ECD centres in Mamelodi, Tshwane that were funded by the CoT from 2009 to 2015. There are 70 principals who manage CoT-funded ECD centres in Mamelodi. In a qualitative study, it was not feasible to include the population in its entirety (Cooper, Schindler & Sun, 2014:338). As such, the researcher drew a sample using purposive sampling.

The researcher made use of open-ended questions contained in an interview guide to investigate the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. During semi-structured face-to-face interview sessions, the researcher utilised an interview guide to ask open-ended questions (Neuman, 2006:250).

### **1.9. Clarification of Key Concepts**

In the section that follows, key concepts that were central to this study will be clarified.

#### **1.9.1. ECD**

According to Section 91 (1) of the Children's Act 38 of 2005, ECD is defined as "The process of emotional, cognitive, sensory, spiritual, moral, physical, social and communication development of children from birth to school-going age". The same definition is shared by Berry *et al.* (2011:17) and the Department of Education (1995: 31). The Department of Social Development (2015:14) also shares the same sentiments and defines ECD as, "The composite cognitive, emotional, physical, mental, communication, social and spiritual development of children that takes place from conception until they enter formal schooling"; a similar definition is also shared by the Uhambo Foundation (2012:1).

In the context of the study, an ECD referred to the pre-school process of development in all the spheres of life that children go through when they are enrolled at an ECD centre in Mamelodi.

#### **1.9.2. ECD Service**

An ECD service is "A service that intends to promote the development of children from birth to school-going age, which is provided regularly by a person who is not a child's parent or caregiver" (Berry *et al.*, 2011:17).

Section 91(2) of the Children's Act 38 of 2005 defines an ECD service as, "Any service that promotes the emotional, cognitive, sensory, spiritual, moral, physical, and social and communication development of children from birth to school-going age".

In a similar spirit, the Department of Social Development (2015:15) defines ECD services as, "Services or support provided to infants and young children or to the child's parent or caregiver by a government department or civil society organisation with the intention to promote early childhood developments."

A parallel definition is provided by the City of Tshwane, which defines an ECD service as, "A range of services to facilitate the emotional, intellectual, mental, spiritual, moral, physical and social development of children from birth to fifteen years (CoT, 2008:9)". The CoT definition of an ECD service is almost similar to the definition of UNICEF (2006:7), it does, however, differ in terms of cut-off age, "A range of services provided to facilitate the emotional, intellectual, mental, spiritual, moral, physical and social development and growth of children from birth to nine years."

In this study, an ECD service was seen as an array of pre-school services that children are engage in ECD centres in Mamelodi, aimed at the holistic development of the child.

### **1.9.3. ECD Programme**

The City of Tshwane defines an ECD programme as, "Planned activities designed to promote the emotional, intellectual, mental, spiritual, moral, physical and social development of children from birth to fifteen years (CoT, 2008:9). Similar words that define an ECD programme are also echoed by the World Bank (2010:2).

UNICEF (2006:7) gives a definition similar to that of CoT, but it provides a different cut-off age, "These are planned activities designed to promote the emotional, mental, spiritual, moral, physical and social development of children from birth to nine years."

Berry *et al.*, (2011:17) views an ECD programme as: "A programme, planned within an ECD service, which intends to provide learning and support suitable to a child's level of

development.” A similar definition is provided in section 91(3) of the Children’s Act 38 of 2005.

The Department of Social Development (2015:16) states that an ECD programme refers to, “The curriculum offered (for playgroups and pre-Grade R programmes) being systematic, geared to holistic development and specifically preparation of skills that will be necessary for school.” A child’s age, stage of development and abilities must be considered when developing an ECD programme (Berry *et al.*, 2011:17).

In the context of the study, an ECD programme referred to the pre-school structured pre-school activities that children are engaged in when they are enrolled in an ECD centre in Mamelodi.

#### **1.9.4. ECD Forum**

A forum is defined (Oxford English Dictionary, 2010) as a meeting or medium where ideas and views on a particular issue can be exchanged. An ECD forum is a voluntary organization for local ECD centres which serves as a representative body for community ECD centres and is governed by a constitution. An ECD forum co-ordinates the ECD sector at community level and manages this sector’s inputs or comments on ECD policy matters (Department of Social Development, 2015:19).

According to Save the Children (2015:14), an ECD forum is a network of ECD practitioners from a specific geographical area in which all ECD services are known and invited to participate. Forum members are aware of, and strive to meet, the legal requirements that govern them as well as the need to implement quality ECD Programmes (Save the Children, 2015:14). Forum members identify challenges and opportunities and develop a plan to address these.

In this study, an ECD forum was seen as a collective voluntary platform of all the ECD centres in Mamelodi, where they meet to share ideas, strategies, challenges and any other matters of concern.



#### **1.9.5. ECD Centre**

An ECD centre is viewed by the City of Tshwane as, “Any building or premises maintained or used whether or not for gain, for the admission, protection and temporary or partial care of more than twelve children away from their parents” (CoT, 2008:9).

A similar expanded definition of an ECD centre is, however, provided by UNICEF (2006:6), “Any building or premises maintained or used, whether or not for gain, for the admission, protection and temporary or partial care of more than six children away from their parents. Depending on registration, an ECD centre can admit babies, toddlers and/or pre-school aged children. The term ECD centre can refer to crèche, day care centre for young children, a playgroup, a pre-school, after school care, etc. ECD centres are sometimes referred to as ECD sites.”

According to the Children’s Act 38 of 2005, the term ECD centre can refer to a crèche, day care centre, and pre-school as well as after school care. The Department of Social Development (2015:16) states, “An ECD centre may offer day care as well as a preschool programme.”

This study adopted the City of Tshwane’s definition of an ECD centre, as mentioned above.

#### **1.9.6. Compliance**

Compliance means adherence to the stipulated requirements or agreements (Oxford English Dictionary: 445). The MacMillan dictionary (2012) defines compliance as a practice of obeying a law, rule or request. For the purposes of this study, compliance referred to the ability of an ECD centre to adhere to the stipulations and requirements of the CoT ECD funding strategy.

#### **1.9.7. CoT ECD Funding Strategy**

A funding strategy is a written and agreed plan that determines the financial requirements of an organisation or group over a length of time (institute of fundraising, 2013:1). According to CoT (2008), the CoT ECD funding strategy broadly covers funding criteria, the selection process, funding, legal and contracting matters and

monitoring and evaluation. It further states that a total amount of R100 000 shall be allocated to the number of selected ECD centres. The study adopted City of Tshwane's definition of CoT ECD Funding Strategy.

#### **1.9.8. Mamelodi**

Mamelodi, part of the City of Tshwane Metropolitan Municipality, is a township set up by the then apartheid government 20 kilometers northeast of Pretoria, Gauteng, South Africa. It was established when 16 houses were built on the farm Vlakfontein in June 1953, and later the name was changed to Mamelodi, the name given to president Paul Kruger by the Africans because of his ability to whistle and imitate birds, also meaning Mother of Melodies. The first residents of Mamelodi worked at bottle making and brick making factories. The Group Areas Act designated Mamelodi as a blacks-only area, though this became moot with the fall of apartheid in 1994. In the 1960s black citizens were forcefully removed from the suburb of Lady Selbourne in Pretoria to Mamelodi, Ga-Rankuwa and Atteridgeville. Anti-apartheid activist the Reverend Nico Smith preached in Mamelodi from 1982–1989 and obtained permission to live there himself from 1985–1989. During that period, he and his wife Ellen were the only whites legally allowed to live in Mamelodi. The township still has vastly more blacks than any other group as of 2010. Since 2001 Mamelodi has had a large AIDS outreach programme helping several thousand orphans in the community. Mamelodi is home to the largest AIDS Hospice Centre in South Africa with 140 beds available free of charge. The unofficial population of Mamelodi is currently close to one million.

#### **1.10. ETHICAL CONSIDERATIONS**

Ethics, in general, refers to what is right and wrong; it is about what is acceptable and not acceptable (Strydom, in De Vos *et al.*, 2011:57). Ethics in research refers to a set of values, standards, and principles used to define proper and acceptable behaviour in the research process (Adler & Clark, 2003:41). Ethical consideration is generally about the measures that were taken to ensure that the researcher conducted the study in a professionally and morally acceptable manner. The researcher adhered to the following ethical issues.

### **1.10.1. Informed Consent**

Informed consent refers to providing adequate information regarding the purpose of the study and also about the procedures to be followed during the study (Strydom, in De Vos *et al.*, 2011:117). This view is further supported by Taylor (2000:7), who states that the giving of all information to participants will enable them to participate in the study voluntarily. The researcher adhered to the principle of informed consent by providing adequate information to principals selected for the study. This information was clearly stated in a letter to participants requesting their participation in the study (refer to addendum A). After all the information regarding the study had been disseminated, the participants were in a position to determine their choice regarding participating in the study (Taylor, 2000:7). The researcher did not coerce any principal of an ECD centre to participate in the study (Babbie, 2007:470). Participants were asked to sign consent forms (refer to addendum B). Crucial information on the consent forms was repeated at the beginning of every interview session and the researcher clarified any uncertainties to the participants.

### **1.10.2. Anonymity and Confidentiality**

The researcher ensured anonymity of participants through ensuring that records are presented in anonymity. The participants were given a choice to remain anonymous by disassociating their names from their responses (Creswell, 2014:99). According to Strydom, in De Vos *et al.* (2011:119), participants have a right to anonymity, and the information that they would have shared would be treated as confidential. The researcher guaranteed the anonymity and confidentiality of participants; this was achieved through the use of pseudonyms. The researcher sought permission from participants to conduct audio recorded interview sessions.

The information furnished by the participants was “kept in the strictest confidence” (Salkind, 2006:61) and confidentiality was ensured by the signing of a consent form that bound both the researcher and the participants to confidentiality. Hagan (2005:570) alludes to confidentiality as a mandatory obligation for the researcher to ensure that information gathered from participants is not divulged to any other participants. The participants were also informed that the researcher would compile a research report to

be submitted to UNISA for academic purposes and that the possible publication of a scientific article on the topic might follow. The researcher, however, guaranteed the confidentiality of participants by assuring them that no information that identified them (particularly, names, surnames and addresses) would be included in the transcriptions, research report and any other further publications.

#### **1.10.3. Debriefing of participants**

The researcher referred participants who were in need of debriefing sessions to a social worker in the Department of Social Development, Manaka building for debriefing meetings. This occurred after the interview sessions so that participants were given an opportunity to express emotions and work through their experiences.

#### **1.10.4. Avoidance of harm**

According to Strydom, in De Vos *et al.* (2011:115), a research study should not cause harm to research participants. Considering that the aim of the study was to develop a deeper understanding of the status of compliance of ECD centres in Mamelodi to the CoT ECD funding strategy, the researcher took pre-cautions to ensure that the study did not leave participants psychologically distressed. This was achieved by thoroughly informing participants about the potential impact of the study and giving them an opportunity to withdraw from the study if they so wished.

#### **1.10.5. Management of information**

Management of information must be read together with anonymity and confidentiality. The researcher reported the findings of the study in an ethically sound manner. The notes, transcripts and audio recordings were kept in a safe place. This was done by locking them in a steel cabinet. The researcher and her supervisor only have access to the research data.

### **1.11. STRUCTURE OF THE RESEARCH REPORT**

The research report consists of four chapters, which are structured as follows:

In **Chapter one** an introduction and general orientation to the study is provided with specific focus on the following: introduction; problem formulation; and problem statement.

This chapter also contains a brief description of the methodology used for the study. This includes a brief theoretical explanation of the research approach, type of research, research design, study population, sampling, data collection and ethical issues.

**Chapter two:** This section outlines concepts, legislative and policy documents related to the topic of this study. In addition it provides a detailed literature review and a theoretical framework applicable to the study.

**Chapter three** consists of a description of how the research methodology was applied during the research. This includes a detailed explanation of the research approach, type of research, research design, study population, sampling, data collection, data analysis and pilot study.

In **Chapter four**, the research findings and literature control are presented. The findings are summarized in themes and are finally presented in table or graphic forms.

In **Chapter five**, a summary of the findings is made. Moreover, the overall conclusions and recommendations of the study are provided. Recommendations include future proposed studies emerging from this study. Furthermore, the researcher indicates how the goal and objectives of the study have been achieved. The key research findings, from which conclusions were drawn, are highlighted and, in turn, recommendations are made.

## **CHAPTER TWO: LITERATURE REVIEW**

### **2.1. INTRODUCTION**

The focus of this chapter is on the historical background of early childhood development (ECD). The background covers the legislative and legal framework, including funding model requirements for compliance. The different role players in the ECD programmes and their role in ensuring compliance measures are outlined. Lastly, the theoretical perspectives in supporting sustainable ECD programmes are unpacked.

### **2.2. ECD HISTORY AND LEGISLATION**

#### **2.2.1. Background of Early Childhood Development**

World-wide, there has been an enlightened acknowledgment of the prominence of early childhood development; this recognition corresponded with research findings on the significance of children's first years of life (Berry, Dawes & Biersteker, 2013:26). Early childhood is seen as the best appropriate phase in child development for investment in human capital with momentous yields from this investment later in life (Lake, 2011:1). Researchers have documented that an investment in early childhood development requires a range of actors who collaborate and corporate to provide holistic services to children and ensure their rights to protection, participation, development and survival (Committee on the Rights of the Child, 2005:4).

#### **2.1.2. International Background of ECD**

In March 1990 the World Conference on Education for All was held in Jomtien, Thailand, and at that conference the importance of early childhood development was underscored as a crucial part of basic education. The first four words under Article 5 provided ECD with a place at the table: Learning begins at birth. This calls for early childhood care and initial education (World Declaration on Education for All, 1990). For many years ECD had been the 'invisible child' hidden behind the family, disconnected from the recognition that its 'older siblings,' like primary, secondary and tertiary education, had received as key components in international development. Through ECD recognition at Jomtien, the rapid ratification of the Convention on the Rights of a Child (CRC), and through the World

Summit for Children held in New York City on September 28 and 29, 1990, the early years (of education?) began to move out of the shadows to a place of recognition in its own right on the international stage (Pence & Nsamenang, 2008:3).

By the late 1990s, UNICEF was moving towards placing Integrated ECD at the centre of its activities as well, incorporating the CRC as an overarching context for all of its work. In fewer than 10 years, ECD had moved from the periphery of concern for all but a few international donors, such as the Bernard van Leer Foundation and a few others who had made significant contributions to ECD as early as the 1970s, to becoming a major topic on a significant number of donors' and international organizations' lists of priority issues (UNESCO 2010:6).

In addition, UNICEF Global Strategic Plan 2014 to 2017 focuses on improving countries abilities to achieve at least 80% of children aged 36 – 59 months. The plan stipulates that children must be engaged in activities with an adult to promote learning and school readiness. Furthermore, there has to be an increased access to caregivers in early childhood stimulation. UNICEF's Regional Priorities for ECD will focus on at least 12 countries to implement new innovative models early childhood learning programs. In particular the communities where primary enrolment and academic achievement is poor will be the primary focus. Such models should also increase the education budget allocation dedicated to support early childhood learning by at least 5%, (Davis & Davis 2012:8).

Brazil is another South American country that has taken significant strides in the development of ECD. According to Terra and Schneider (2007:167), in 2003 Brazil took an initiative to pilot the World Bank's programme on ECD. The programme was branded "Millennium development fund for ECD". The aim of the programme was to provide small grants to communities and non-governmental organisations to establish and maintain quality ECD services for young children. The programme had two goals, firstly, to strengthen the capacity for ECD initiatives and, secondly, to support and develop ECD programmes (Terra & Schneider, 2007:167)

In 2008, through the Council of Australian Governments, all state and territory governments in Australia jointly agreed to the National Partnership Agreement on Early Childhood Education. The aim of the agreement was to achieve quality, universal coverage, all levels of government agreed to increased, sustained financial investment, which was partially aided through additional funding of \$970 million (AUD) by the Commonwealth of Australia over a five-year period. The program's multipronged funding approach is effective largely due to strategic mapping, constant monitoring, and extensive evaluation methods at the local level (Davis & Davis 2012:9).

### **2.1.3. African Background of ECD**

African leaders played key roles in a number of the international events described above. According to Black (1996:31), the New Partnership for Africa's Development (NEPAD) is a pledge by African leaders, based on a common vision and a firm and shared conviction. They have a pressing duty to eradicate poverty and to place their countries, both individually and collectively, on a path of sustainable growth and development, and at the same time to participate actively in the world economy and body politically.

African heads of state were amongst the earliest and most enthusiastic supporters of the Convention on the Rights of the Child. In 1993 the Donors for African Education (now the Association for the Development of Education in Africa, ADEA) organized a Working Group on Early Childhood Development (ADEA-WGECD), which continues to play a key role in African ECD development. In 1994 the first of several African ECD networks was formed, the Early Childhood Development Network in Africa (ECDNA). This was followed by a Francophone network in 1996, *Reseau Africain Francophone Prime Enfance* (Garcia & Pence, 2010:125).

In 1997 the World Bank published a survey of African countries with regard to the percentage of the education budget allocated to ECD; of the 25 countries responding, only four had made any official allocation to ECD and those were for very small amounts (Colletta & Reinhold, 1997:13). In 1998, the 7th Conference of Ministers of Education of African member states (ADEA-MINEDAF VII) accepted recommendations noting "that



clear policies be formulated to promote early childhood education and development” (ADEA-MINEDAF VII, April 1998, Report of the VII Conference). This growing level of support for ECD within the African Ministries of Education was followed by the World Education Forum held in Dakar, Senegal, in April 2000, which came forward with ECD as the first goal. Furthermore, the “Dakar EFA goals are intended as an ‘education wing’ of the Millennium Development Goals (MDGs) of the United Nations, also adopted in 2000” (NEPAD, 2004; Education Sector Framework working draft, 2004:9).

Building on activities associated with ten-year anniversaries of the World Summit for Children and the ratification of the Convention on the Rights of the Child (all in 1990), leaders of the Organization of African Unity (OAU) held a Pan-African Forum in May 2001 in Cairo that led to an African common position in a declaration and plan of action called Africa Fit For Children (Pan-African Forum for Children, 2001:11). The document notes that the Plan of Action “prioritizes children and youth,” and it goes on to note as the first action: “National planning and international development cooperation should reflect the prioritization of early childhood and youth” (Pan-African Forum for Children, 2001:12).

#### **2.1.4. Background of ECD in South Africa**

The post-apartheid South African government has demonstrated a commitment to “first call for children” by announcing early childhood development as a top priority for the country (Department of Basic Education, 2010:10). The recent renewed commitments on the government’s commitment to early childhood development can be found in The National Development Plan: Vision 2030, which states that the country has to ensure that there are high quality, acceptable, appropriate and universally accessible early childhood development programmes and interventions by 2030 (Republic of South Africa, 2011:48; Viviers, Biersteker & Moruane, 2013:34).

Furthermore, the National Development Plan identifies ECD as a priority. It proposes that every child should attend two years of ECD before entering Grade One. The NDP views early childhood development as a public good that needs mandatory support from the government, as it holds key benefits in the long term, not only for the individual child but also for the child’s family, community and society as a whole. The National Development

Plan sees early childhood development as an all-inclusive set of interventions that addresses all spheres of a child's well-being (Republic of South Africa, 2012:298). It is imperative to note that the Government of South Africa's Medium Term Strategy Framework, setting out the government's strategic plan for 2014 to 2019, prioritised early childhood development (Department of Planning, Monitoring and Evaluation, 2014:17, 23).

Noteworthy is the fact that, in 2014, an election year in South Africa, there was a solid political acknowledgment and determination to give priority to early childhood development. As the ruling party, the African National Congress (ANC) highlighted in its election manifesto that it would "make early childhood development a top priority" in the next five years (African National Congress (ANC), 2014:35). Similar sentiments are also echoed in the election manifestos of three other main political parties, namely the Democratic Alliance (2014:43) and Economic Freedom Fighters (2014:13-14). The above mentioned reflects general political consensus on the importance early childhood development and its importance on the country's social, economic and political agenda.

Currently, the Department of Basic Education is responsible for Grade R, the reception year immediately before Grade one. The Department of Social Development (DSD) is responsible for ECD services for younger children. The Medium Term Strategic Framework confirms that the DSD will be responsible for the extra year of pre-school education. According to UNICEF (2016:5), ECD became a separate budget sub programme within the children and families programme in 2014/15. The Children's Act 38 of 2006 specifies this as a service that the provincial MEC "may", rather than "must", provide. In 2016/17, the combined allocations for ECD across the nine provinces amounted to R2, 285 million (UNICEF, 2016:5).

ECD before Grade R is almost always provided by Non Profit Organisations (NPOs) which run ECD centres, while Grade R is provided mainly in public schools. The 2013/14 national audit of ECD centres found a total of around 18,000 ECD centres in the country

(UNICEF, 2016:5). This is similar to the number of schools with Grade R in the country. UNICEF (2016:5) notes that the difference is that all registered schools (whether government or private) receive a government subsidy in respect of the service, while only about two thirds of the ECD centres are subsidised by government. ECD is the only DSD service area in which NPO subsidies are more or less standardised across provinces.

- In South Africa, a key legislative instrument that is relevant to the provision of ECD services is the Children's Act. The Children's Act 38 of 2005 is a comprehensive law on matters affecting children.
- The Children's Act provides a legal framework to guide anyone involved in the care, development and protection of children.

Furthermore, the Children's Act provides a definition of ECD. ECD is defined in Section 91.1 of the Children's Act 38 of 2005 as "The process of emotional, cognitive, sensory, spiritual, moral, physical, and social and communication development of children from birth to school-going age". ECD practitioners are required to perform their duties and responsibilities according to the Act.

### **2.3. EARLY CHILDHOOD DEVELOPMENT AS AN INVESTMENT AND A CHILDREN'S RIGHT**

Opinions on the worth of investing in quality interventions for children have appeared in the past few years. A lucidly clear statement was delivered by James J. Heckman, the 2000 Nobel Laureate in Economic Sciences, who stated, "The real question is how to use available funds wisely. The best evidence supports the policy prescription: invest in the very young and improve learning and socialisation skills" (Heckman, 2004:2). A review of the literature on early childhood development affirms that efficient and effective early childhood development interventions have a profound impact on the development and well-being of the child's entire life, and it is also a society's socio-economic investment (Biersteker, 2012:52; Britto, 2008:102; Heckman & Masterov, 2007:5; Shonkoff & Richter, 2013:31). It should, however, be noted that "inexpensive services that do not meet the quality standards are a waste of money" (National Science Council, 2007:2-3). A vital forewarning for return on

investment in early childhood development is, therefore, the quality of services provided.

According to Berry *et al.* (2013:27-31), early childhood development services include a range of interventions provided: (i) at a household level by parents and caregivers; (ii) in the community through development programmes; and (iii) through structured policy interventions comprising of health care services, nutritional support, early learning and development programmes, social protection, child protection services, specialised services for children with special needs, and adequate living standards. According to Tomlinson (2013:58), these interventions are applied within a specific context and structure that are often determined by the spatial location of the child.

Even though investment in early childhood development offers a good argument to lobby quality, holistic and comprehensive interventions, the provision of support, care and intervention services to children are fundamental rights that should be honoured (Lake, Berry, Dawes, Biersteker & Smith, 2013:1). These rights are protected by the international child rights obligations that South Africa ratified such as the United Nations Convention on the Rights of the Child (United Nations, 1989) and the African Charter on the Rights and Welfare of the Child (African Union, 1990), as well as in The Constitution of the Republic of South Africa, 1996 (September & Dinbabo, 2008). South Africa uses a rights-based approach to the rendering of early childhood development services. This approach places an obligation on duty bearers for young children to protect and fulfil the rights of young children.

Investment in care, support and early learning interventions for young children does not ensure only positive outcomes for the wellbeing and development of the individual child, but it also ensures the realisation of the rights of young children.

### **2.3. EARLY CHILDHOOD DEVELOPMENT PROGRAMMES IN SOUTH AFRICA**

Since 1994, South Africa has taken a number of steps towards creating an empowering, multi-sectoral and combined structure for the expansion of the wide-ranging rights of

young children. However, ECD results and general national changing outcomes, which are reliant on optimum early development, have trailed behind.

Between 1995 and 2013, there were several policy documents and acts that recognised the key developmental role of ECD in South Africa (Martin *et al.*, 2014). The National Integrated Plan on ECD 2005-2010 (NIPECD) was one of these policy documents that initiated a mix of influential organisations tasked with enabling management across departments and between the different realms of government (UNICEF, 2005). The NIPECD diagnosed that ECD services should to be provided through diverse programme methods and that the focus should not be on the centres only. This plan was consequently earmarked to expand home-, community- and centre-based programmes, to ensure ECD services for all children, with the focus on the 0 - 4-year-olds, as well as susceptible children. The focus of this plan included children in rural areas, in underserved areas, children with disabilities and/or those who are chronically ill.

Non-Governmental Organisations (NGOs) were identified as necessary partners in the attainment of the key aspects of the NIPECD. This initiative gave rise to numerous privately run facilities. The incentive for them was the subsidization of their operating costs, through a funding model, allowing for better quality service delivery to children (Martin *et al.*, 2014). Research evidence shows that grants are also closely associated with improved nutritional outcomes, as well as preschool attendance (Hwenha, 2014). The payment of government subsidies, therefore, attracts the placement of more young children into ECD facilities, which provides more children with early stimulation and education. Although progress has been made in ECD provisioning, access to and the quality of the services remain major challenges. Access is particularly limited for the most marginalised children living in poverty, the very young under the age of two, children in rural areas and those living with a disability (Hwenha, 2014). Access for children with disabilities is prioritised, but many facilities do not have the resources or trained staff needed for these children.

The shortcomings in the services and support, which is primarily provided by the private sector, must be noted. Only a small proportion of children with disabilities are estimated to be attending ECD centres. An analysis of the profile of the Care Dependency Grant (CDG) beneficiaries in 2006 found that only 24% of the children aged 0 - 6 years, who were recipients of the CDG, attended a crèche or child-minding group (Landry, 2008). This infringes on the right of children with disabilities, who also have a right to education. Social workers, as advocates for the rights of people, should be instrumental in making this right recognised.

This, however, seems to be the reality of children living in poverty and those with disabilities in South Africa. The questions of what the government is doing to improve the situation for these children on the ground level, as well as who is responsible for the implementation of National legislation that protects the rights of children on paper, need to be answered.

## **2.4 ROLE PLAYERS IN THE PROVISION OF ECD**

In South Africa ECD role players are found at national, provincial and local level

### **2.4.1 The Role of the Department of Social development (DSD)**

The Department of Social Development carries a mandate to implement ECD services as legislated for in the sections of the Children's Act (Mahery, Jamieson & Scott, 2011:61). Registration of ECD centres is outlined in Sections 80 and 81 of the said Act and is further explained in regulation 14 (1) on the registration of ECD centres. The sections and subsequent regulations of the Children's Act categorically outline application requirements for the registration of ECD facilities (these requirements are discussed elsewhere in this chapter).

### **2.4.2 The Role of the Department Of Basic Education**

Although the Children's Act cites the Department of Social Development as a department responsible for providing ECD services for children below school-going age, it should be noted that, since the introduction and roll-out of grade R in public primary schools, the

Department of Basic Education has started to take responsibility for children from grade R onwards. The Department of Education's White Paper explains that ECD services are for children younger than nine years. The Department of Basic Education provides the Foundation Phase and grade R classes in primary schools and support to community-based grade R facilities.

### **The Role of the Department of Health**

Another significant role player in the provision of ECD services is the Department of Health. For children with disabilities, access to assessments is critical to guide learning programmes, interventions and support to meet children's individual needs. Such assessments may be conducted in collaboration with the Department of Health and/or the Department of Education. The Guidelines for Early Childhood development services (2006) state that the Department of Health plays a key role by:

- delivering health care services;
- providing health education and nutrition support to pregnant mothers and young children;
- conducting screening and assessments of children with disabilities; and
- promoting home-based stimulation and appropriate developmental programmes.

Children younger than six years are entitled to free public health services. Useful ECD programmes include links to health services, such as the community-based Integrated Management of Childhood Illness services. The road-to-health card can be used as a communication and monitoring tool and promote collaboration between health and ECD services. It should be noted that ECD practitioners are in an excellent position to identify children and families who need services and other forms of assistance.

Referral systems need to be developed and strengthened between relevant departments (for example, the Department of Social Development) and ECD service providers so that young children receive appropriate services when they need them. The National Integrated Plan (NIP) for ECD in South Africa (2005 – 2010), which was under review in

2011, strongly promotes collaboration and partnership between government and civil society to improve the delivery of ECD services and programmes.

#### **2.4.4. The Role of Municipality**

The Constitution of the Republic of South Africa (1996) contains a Bill of Rights. This bill of rights applies to all, especially the vulnerable groups like young children (Abrahams & Matthews, 2011:13). The right to education is one of the rights enshrined in the constitution. As such, the right to early childhood development should be promoted, protected and fulfilled by all spheres of government, including the local government / municipalities. The constitution obliges local municipalities to adhere to the financial support of the ECD and play their role within the constitutional democracy to fulfil the rights of children. Moreover, Schedule 4B of the Constitution allocates power to municipalities in terms of child care facilities this schedule gives municipalities powers to make, administer and implement by laws regarding child care facilities, however, no clear definition within the existing legal frameworks that state exactly what a child care facility is and/or what it encompasses, as defined by the Constitution (RSA, 1996).

Early post-apartheid policies related to ECD directly stated that municipalities should play a significant role in the promotion and provision of ECD service delivery. These include the following:

- The White Paper on Education and Training of 1995 (Department of Education, 1995);
- Interim Policy for Early Childhood Development of 1996 (Department of Education, 1996);
- The White Paper for Social Welfare of 1997 (RSA, 1997);
- The White Paper for the Transformation of the Health System in South Africa in 1997 (Department of Health, 1997); and
- The Education White Paper Five on Early Childhood Education in 2001 (RSA, 2001).

These policies emphasise that municipalities have a role to play in the promotion, provisioning and development of ECD services specifically, and, as such,



acknowledge the importance of the municipalities in ECD. Though repealed in 2010, it is noteworthy that the Child Care Act 74 of 1983 in its Regulations (Regulation 30) gave an explicit mandate to municipalities to ascertain and confirm that “places of care” complied with local health and safety standards. This encourages an early example of the role of municipalities in ECD.

The Children’s Act 38 of 2005 makes similar provisions in terms of partial care facilities that operate ECD programmes, and it states, in section 78(2)(b)(ii), the requirement of compliance with “structural safety, health and other requirements of the municipality of the area where the partial care facility is situated”. The main difference is the stipulated “other requirements”, which is an addition to the previous statutory role of municipalities, and it is implied that these will be prescribed in municipal bylaws (Berry, Jamieson & James, 2011:38). The Children’s Act 38 of 2005 also provides, for the first time within statutory provisions, a clear role for local municipalities to play in the provision of ECD programmes through the assignment of functions by the provincial government to municipalities. The aforesaid policy provides for the more formal agreement on ECD services between spheres of government.

Municipalities, by virtue of their status as a sphere of government, have an obligation and mandate with regard to the realisation of the rights of young children. Many local municipalities have early childhood development policies; provide services to young children and their families; contribute to the regulation of partial care facilities (ECD centres) through environmental health assessments; and regulate and support child-minding or day mothers (persons taking care of fewer than 6 children). These vary from municipality to municipality and are often insufficient (Viviers *et al.*, 2013:35).

A Philippines study conducted by Behrman, King and Laigo (2004:19) directs that even though policy making in ECD rests at a central government level, implementation and financing of these services should be accorded to local municipalities and that this should be regulated and enforced by national legislation. In a similar vein, Britto, Yoshikawa, van Ravens, Ponguta, Reyes, Oh, Dimaya, Nieto and Seder (2014:50) indicate that the traditional focus of ECD-related work at national and provincial levels of government

frequently does not take into account decision makers at a local level who are at the grassroots of service delivery. Their study demonstrates, “The significant role of the local level of government in governance decision that impacted on equity, access and quality” (Britto, Yoshikawa, van Ravens, Ponguta, Reyes, Oh, Dimaya, Nieto & Seder, 2014:252-253).

#### **2.4.5. Role of a Social Worker**

When rendering ECD services, social workers should be able to apply a developmental approach in their practice. Developmental social work is all social work practised in the delivery of developmental welfare services (Gray, 2006:S54). This includes social workers who are currently working with ECD practitioners. The roles played by developmental social workers include the:

- *Enabler role*, involves increasing the service users’ personal and social powers so that they are empowered to take action to improve their lives (Patel, 2005:219).
- *Mobiliser role* is a catalyst role, whereby the social worker helps community members to identify their needs and to take action to address those needs (Midgley, 2010: 20).
- *Facilitator role*, includes the social worker facilitating group discussions, decision making and empowering service users by offering them skills and knowledge (Patel 2005:219).
- *Educator role*, involves various educational roles that include mentoring, coaching and skills training to service users and empowering them with regard to how to access resources (Patel, 2005:219).
- *Counsellor role*, is about providing guidance and support to service users and helping individuals, groups and families to solve problems psychosocially (Midgley, 2010:19).
- *Broker role*, this includes linking service users with physical, financial, educational, technical and environmental resources in order for them to meet their needs (Patel, 2005:220).

- *Networker role*, involves linking service users with resources and mobilising partnerships to achieve mutual benefits (Midgley, 2010:19).
- *Mediator role*, entails resolving conflict between parties including family counselling, victim-perpetrator mediation, community building initiatives, and reconciliation resolution over resources between projects and agencies (Patel, 2005: 221).
- *Advocacy role* is about speaking on behalf of service users to ensure fair and equitable treatment, whilst upholding social justice (Midgley, 2010: 20).
- *Social protector role* includes the social worker protecting the rights of vulnerable groups (Patel, 2005:222).
- *Innovator role* involves coming up with new ideas of practice and service delivery through initiating them at organisational level, which also may impact on social work practice at broader levels (Patel, 2005: 222).

Based on the above listed roles, it appears that the generalist social work roles are similar to the developmental social work roles. Greater emphasis is, however, placed on socio-economic development in the developmental social worker's roles. According to Patel and Hochfeld (2013), the roles of developmental social workers are established in national welfare policies, but there is a gap between the theory and practice of these roles. Thus, it is vital for all South African social workers, including ECD social workers, to grasp these roles in practice so as to ensure the delivery of developmental welfare services.

However, social workers face challenges in rendering services in the ECD arena. The challenges faced by social workers in addressing the compliance issues by ECD centres can to a certain extent be blamed on the political interference during the recruitment processes. Political interference is also evident even after the recruitment process, making it very difficult to resolve the challenges associated with non-compliance to the CoT ECD funding strategy. Eventually, ECD centres end up being asked to close down owing to non-compliance, which usually leads to the facilities neglecting children attending their centres.

Although some researchers express the importance of investing in ECD (Heckman & Masterov, 2007:33; Lineburg & Gearheart, 2013:50), the challenge is that once funding is allocated to the ECD centre, principals fail to comply with the funding requirements. In the City of Tshwane, this is of concern as this continues to be a problem for community ECDs. Despite this, there remains a surprising lack of research on the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

## **2.5. THE REGISTRATION OF ECD PROGRAMMES AND ECD CENTRES**

ECD centres and ECD programmes must be registered separately. All ECD service providers are legally required to register their ECD programme (Sections 95 and 96 of the Children's Act). In addition, ECD centres are legally required to register as partial care facilities. If one is running an ECD centre, one must register the centre firstly as a partial care facility. Secondly, the person must register the ECD programme.

Although there are different kinds of registration for ECD programmes and centres, the same registration process is followed if one wishes to apply for the following:

- first-time registration;
- conditional registration;
- renewal of registration that is due to expire or has expired; or
- to have a cancelled registration reinstated.

### **2.5.1. Registering an ECD programme**

The registration of an ECD programme is covered in sections 95 and 96 of the Children's Act. These sections state that, before one applies for the registration of an ECD programme, one must screen all staff against the National Register for Sex Offenders and Part B of the National Child Protection Register (NCPR). Once in receipt of clearance certificates, an application can be submitted on a form 16 to the provincial head of the department of social development or the municipal manager. It should be submitted with all the supporting documentation. The relevant supporting documentation is as follows:

- An overview of the ECD programme for which application for registration is being made.
- An implementation plan for the ECD programme.
- The staff composition including a description of the skills needed to provide the ECD programme. Supporting documents should be attached, including copies of staff members' identity documents and qualifications.
- Clearance certificates certifying that the names of the applicant and staff members do not appear in the National Register for Sex Offenders or in Part B of the NCPR.

The provincial head of social development or the municipal manager can also request additional information relating to the application (Berry, Jamieson & James, 2011:25). All ECD programmes must be put through assessment and monitoring every two years. The assessment and monitoring is conducted by social workers.

The provincial head of social development (HSD) or municipal manager must respond within six months and either refuse the application or register the programme (with or without conditions) (Berry, Jamieson & James, 2011:26).

All relevant factors must be taken into account when considering the application. For example:

- Does the ECD programme adhere to the required norms and standards as set out in the Children's Act regulations and other requirements?
- Is the applicant a fit and proper person to provide an ECD programme?
- Are the skills, training, funds and resources available to provide the ECD programme?
- Is the ECD programme able to meet the emotional, cognitive, sensory, spiritual, moral, physical, and social and communication development needs of the children for whom the programme is intended?

If the application is granted, the applicant must receive a certificate of registration on Form 17, as prescribed in the Children's Act. The certificate must also state the time

period for which the registration is valid. In terms of Regulation 25(1) of the Children's Act, the application is valid for five years. If the application is refused, the provincial HSD or municipal manager must inform the applicant of the refusal on Form 18 as set out in Regulation 25(3) of the Children's Act.

### **2.5.2. Registering an ECD Centre**

The registration of an ECD centre is covered in sections 80 and 81 of the Children's Act. These sections state that before one applies for a registration of an ECD centre one must submit an application form to the provincial Head of Social Development or to a municipal manager. As part of the application process, a person registering an ECD centre should complete Form 11, as prescribed in the Children's Act and submit it together with a report by a social service professional or a social worker. ECD practitioners are required to contact their nearest department of social development office or municipal office to ask for help with the registration process and request a visit and report from a social service professional. The following supporting documentation must also be submitted to the registering authority:

- A business plan containing the business hours of the centre, the fee structure, the day-care plan, the staff composition and the disciplinary policy.
- The constitution of the centre. This should contain the following;
  - ✓ the name of the centre;
  - ✓ the types of services to be provided;
  - ✓ the composition, powers and duties of management, and, where applicable, the powers, obligations and undertaking of management to delegate all authority regarding the care, behaviour management and development of children to the head of the centre;
  - ✓ the procedure for amending the constitution; and
  - ✓ a commitment from the management to ensure that the centre meets the national norms and standards for partial care facilities.
- A copy of the approved building plans or a copy of the building plans that has been submitted for approval if the plans have not yet been approved.

- An emergency plan as stipulated in the norms and regulations of the Children's Act.
- Clearance certificates certifying that the names of the applicant and staff members do not appear in the National Register for Sex Offenders or in Part B of the National Child Protection Register.
- A health certificate issued by the local municipality where the centre is or will be located confirming that the centre meets the health requirements of that municipality. ECD practitioners should ask an environmental health practitioner from the local municipal office to visit the centre.
- A description of the skills of the manager of the ECD centre. Supporting documents should be attached, including copies of the manager's qualifications.

The provincial Head of Social Development or municipal manager can also request additional information relating to the application. Applications for renewal of both ECD programmes and ECD centres must be made at least 90 days before the registration is due to expire, but the provincial Head of Social Development or municipal manager can allow a late application on good grounds. If the application was submitted at least 90 days before the registration was due to expire, then the provincial HSD or municipal manager must renew the registration before it expires.

The Provincial Head of Social Development or municipal manager must respond within six months and either refuse the application or register the programme (with or without conditions). All relevant factors must be taken into account when considering the application. For example:

- Does the ECD centre adhere to the norms and standards and other requirements? Section 78(2)(b)(ii) of the Children's Act states that ECD centres need to meet the structural, health and other requirements of the municipality in which the centre is located. Such requirements would include municipal by-laws which may include applying for re-zoning.
- The applicant is a fit and proper person to manage an ECD centre.
- The applicant has the necessary funds and resources available to provide ECD

services at a centre.

- Each person employed at or involved in the centre is a fit and proper person to assist in providing ECD services at a centre.
- Each person employed at, or involved in, the centre has the required skills and training to assist in providing ECD services at a centre.

The provincial Head of Social Development or municipal manager must consider a report of a social service professional before deciding on a registration application. The Act states that a provincial Head of Social Development or municipal manager may assist an owner or manager of an ECD centre or ECD programme to meet the required norms and standards and other requirements.

## **2.6. STAFF REQUIREMENTS FOR ECD CENTRES**

Regulation 27 of the Children's Act 38 of 2005 puts in place specific requirements about the number and qualifications of staff working in ECD programmes. The regulations state that the person applying for registration of an ECD programme must have the following qualifications and training:

- The National Certificate in Early Childhood Development at National Qualification Framework (NQF) Level 1 to 6 of the South African Qualifications Authority;
- An appropriate ECD qualification; OR
- A minimum of three years' experience in implementing ECD programmes.

In addition, the applicant must show appropriate knowledge of ECD. The applicant must also show that he/she has the skills to:

- identify, record and report on the progress and developmental needs of the child and to consider opportunities and interventions that will improve a child's development;
- design and produce stimulating activities and routines according to the developmental needs of the children; stimulate, extend and promote all-round development through interactions that enhance children's emotional, cognitive, spiritual, physical and social



development;

- create awareness of, promote and ensure the safety, protection, security, rights and development of the child, using community resources where applicable;
- provide ECD programmes appropriate to the needs of the children served, including children with disabilities, chronic illnesses and other special needs; and
- implement systems, policies and procedures and to manage physical, financial and human resources.

All staff working in ECD centres or programmes must be screened against both the National Child Protection Register (NCPR) and the Sexual Offences Register. Everyone, including volunteers and people who do not work directly with children, such as cooks or gardeners, must be screened. The head of an ECD centre or programme should complete Form 29 as prescribed in the Children's Act and send it to the Director-General of Social Development to check whether the names of staff or volunteers are on the NCPR.

It is an offence, punishable by up to 10 years in prison, or a fine, or both, to allow someone access to children if the person has been declared unsuitable to work with children. A person found unsuitable to work with children could be dismissed if he or she does not disclose that information to an employer.

## **2.7. FUNDING POLICIES**

### **2.7.1. Funding from the Department of Social Development**

NPOs are responsible for much of the service delivery of social development services in South Africa. Some of the NPOs are subsidised for this service delivery. The subsidy amounts are reflected in the budget documents as transfers to NPOs.

The Children's Act 38 of 2005 gives further substance to the strong rights for children enshrined in the country's Constitution of 1996. The Act specifies that the provincial Members of the Executive Council (MECs) "must provide" several of the services, and "may" provide" other services. These clauses identify services that the provinces must

either deliver themselves, or allocate resources to other actors to enable them to deliver services on the provinces' behalf. It is typically non-profit organisations (NPOs) that play this role, with minimal for-profit private sector provision. According to UNICEF (2016), since 2014/15, funding for children's services has its own budget programme within provincial DSD budgets.

### **2.7.2. The City of Tshwane ECD Funding Strategy**

As one of the significant stakeholders in the arena of ECD, the CoT, drafted an ECD funding strategy document of 2006/07. During the 2006/07 financial year, R15 million was allocated for the funding of ECD centres in Tshwane (CoT, 2008:8). The principal aim of this funding was to assist ECD centres to improve services for children and to ensure that the teachers and caregivers were trained in relevant skills. Systems and processes for disbursing the money were put in place (CoT, 2008:8). It should be noted that the provision of financial support to service providers, through a funding strategy, is essential to promote efficient, effective, quality and transformed services, targeted at the vulnerable and previously disadvantaged members of the society, including children.

According to the CoT (2008:10-12), the CoT ECD funding strategy broadly covers funding criteria, the selection process, funding, legal and contracting matters. It also covers monitoring and evaluation issues. The strategy further states that a total amount of R100 000 shall be allocated to the number of selected ECD Centres.

For an ECD centre to be eligible for funding, the centre must meet the following compliance criteria:

- The ECD centre must be registered in terms of the Non-profit organisations Act No. 7 of 1997. The said Act seeks to ensure accountability in the use of public funds.
- In a case of no registration, the ECD centre should prove that it has taken the necessary steps to apply for registration. Alternatively, it must prove its affiliation to a registered organisation.
- The ECD centre must be registered in terms of other specific legislation, for instance, the Children's Act 38 of 2005.

- The ECD centre must be in possession of a constitution that enshrines principles and objectives of social development.
- The centre must demonstrate equity, inclusiveness and representability in all spheres of its rendering of services. Intentional and deliberate targets should be on the previously disadvantaged and vulnerable groups, in order to address the historical imbalances.
- The centre should be able to comply with the prescribed criteria in accounting for the utilization of funds as set out in the Municipal Finance Management Act 56 of 2003 (MFMA) with due regard given to section 67.
- The centre should have a history of financial integrity.
- The ECD centre must be operating from a back yard or in informal areas within the CoT.

Furthermore, the CoT ECD funding strategy stipulates that, for an ECD Centre to be eligible for funding, the Centre must meet the following compliance criteria:

- It should have a health certificate;
- It should have a drafted menu for meals;
- It should indicate its educational programmes;
- It must have a backyard garden; It must have qualified and certified ECD teachers;
- The ECD centre must have one principal (who is normally a founder of the centre);
- It must have a minimum of one administrator;
- It must have a kitchen that is positioned separately from where the children play and learn;
- It should have a minimum of six toilets relevant for the age of children;
- It must have a play space;
- Children should be divided according to the relevant ages and each class should have a teacher; and
- The ECD must have a cleaner, a chef and a gardener.

### **2.7.3. Funding from the Department of Education**

The Department of Education provides funding for the training fees and a stipend for the person being trained (Budlender, Mapker & Parenzee, 2015:102). The training fee is paid directly to the training service provider. In some provinces the stipend is also paid

through the service provider, but in other provinces it is paid through the centre where the person who is being trained is working. Provincial Departments of Education also provide some subsidies for community-based organisations that provide grade R services. These funds are available only for organisations that are registered with the Department of Education as “independent schools”. In some provinces the funding is given as a per-child subsidy. In other provinces the funding takes the form of a salary for a grade R practitioner. Where salaries are paid, the money usually goes directly into the account of the practitioner. The training funds from the provincial Departments of Education are seen as part of government’s Expanded Public Works Programme (EPWP). Phase II of the EPWP started in 2009 and offers a potential source of ECD funding in the form of the Community Works Programme (CWP) (Corporate Governance and Traditional Affairs (CoGTA), 2018:26).

The CWP supports community-based projects. The communities are selected on poverty-related criteria. Within each selected community, community members decide what types of work are needed (for example, road building, school infrastructure or ECD services). The CWP cannot fund ECD services directly. But ECD-related activities can be included in the work that is done by the community members. For example, if the work is done within an ECD centre, then the CWP indirectly subsidises the costs of the centre.

#### **2.7.4. Funding from the Independent Development Trust**

The Independent Development Trust (IDT) manages a separate pot of money for non-government Expanded Public Works Programmes. The IDT advertises these funds in national newspapers and on radio in October or November each year. The advert states the criteria, for example, the applicant must be a registered NPO, must be tax exempt, and must have existing work opportunities or a plan for creating them. Applications for IDT funds must be sent to regional offices. The regional offices then recommend to the national IDT which organisations should be funded. If the proposals are accepted, the funding covers wage costs only.

### **2.8. CoT ECD FUNDING COMPLIANCE PROGRESS AND CHALLENGES**

The director and the social workers involved in monitoring ECD centres recruit the qualifying ECDs and grant the funding. This is done after all the aforementioned requirements have been met (see 2.8.2). The granted fund is managed as follows, a total amount of R100 000 is issued to the qualifying ECD centre, of which R40 000 should be used for the training of teachers, R30 000 for the purchasing of educational material and R30 000 for food (CoT, 2008:9). As a compliance mechanism, the ECD centre should keep records of these transactions and submit them to social workers on a monthly basis for reporting purposes. Upon receipt of records in the form of receipts and invoices, social workers responsible for monitoring the ECD centres should compile a monthly progress report and submit it to the respective director.

From personal experience, the researcher notes that social workers are mandated to supervise, monitor and evaluate the activities of an ECD centre on a weekly basis so that they can give support and advice when necessary. If there are discrepancies, social workers must resolve them and indicate recommendations or remedial processes in the progress report. The social workers also arrange monthly ECD meetings; the attendees of these meetings are principals and nominated teachers. These meetings provide ECD practitioners with an opportunity to raise their concerns and discuss progress and challenges. The meetings also provide the social workers with an opportunity to respond to concerns and to map the way forward.

As a social worker who was once involved in supervising and monitoring ECD centres in Mamelodi, the researcher often found that ECD centres did not comply with the CoT ECD funding strategy. This study was, therefore, initiated based on the observations.

## **2.9. STATUS OF THE PROVISION OF ECD INTERVENTIONS IN SOUTH AFRICA**

The paragraphs that follow provide a summary of the status of the delivery of early childhood development service in South Africa. They reveal specific diagnostic reviews that were undertaken in relation to ECD, as well as key statistics on the Status of young children in South Africa, and they reflect on the situation in relation to governance in ECD service delivery.

### **2.9.1. Macro Assessment of ECD Services**

The National Planning Commission in the Presidency issued a diagnostic review that establishes that “despite the policy commitment to early childhood development, implementation in the poorest communities lags behind”, and this is visible in the country’s development indicators on children (RSA, 2011:14). This is further validated by the National Planning Commission, through a National Development Plan that was issued at the end of 2011. The National Development Plan regrettably indicates that ECD programmes do not serve South African children as they are intended to (RSA, 2011:269). This was established by the diagnostic review on early childhood development in 2012 (Richter *et al.*, 2012.) In analysing the reasons used to arrive at the decision that ECD programmes in South Africa do not adequately serve the needs of children in South Africa, Viviers, Biersteker and Moruane (2013:34) categorise the arguments used as follows.

#### **2.9.1.1. Policy and Planning**

In analysing the policy and planning issues related to the provision of ECD services in South Africa, Viviers *et al.* (2013) came up with the following as reasons for South Africa’s failure to meet the needs of its young children efficiently and effectively:

- Limited integration across policies related to early childhood development;
- Fragmented and uncoordinated planning for young children;
- No shared vision, goals and accountability in the implementation of early childhood development services;
- Uneven quality of information systems and data in the government and non-governmental sector;
- A significant gap between policy and practice; and
- A lack of planning based on population (age) and geographical coverage.

#### **2.9.1.2. Resources**

In analysing resource issues related to the provision of ECD services in South Africa, Viviers *et al.* (2013) advanced the following as reasons for South Africa's failure to meet the needs of its young children efficiently and effectively:

- Inadequate funding and inappropriate funding models;
- Limited human resources for providing quality early childhood development services;
- The absence of an integrated human resource policy and strategy across all sectors; and
- Insufficient service infrastructure to support different ECD services.
- 

#### **2.9.1.3. Delivery**

In analysing delivery issues related to the provision of ECD services in South Africa, Viviers *et al.* (2013) offered the following as reasons for South Africa's failure to meet the needs of its young children efficiently and effectively:

- Unequal access and quality of services within and across sectors (poor targeting mechanisms);
- Limited monitoring and support to ensure quality in service delivery; and
- Delivery skewed towards urban and centre-based early childhood development services.

Nevertheless, the National Development Plan sets "high-quality, universal early childhood education" as one of its targets for 2030 (RSA, 2012:297). It views early childhood development as a holistic set of interventions, all-encompassing of health, nutrition, social protection, parenting support, early learning and development, amongst others (RSA, 2012:297). Thus, the vision is to carry on the path set out earlier in the 2000s to have early childhood development as a top priority for the country.

#### **2.9.4. Young Child Survival, Development and Protection in South Africa**

Young children (from birth to four years of age) represent 10,6% (5,7 million) of the total South African population (Statistics South Africa, 2014 b:9). Since this is a substantial number, it should, therefore, be seen against the larger backdrop of socio-

economic development in South Africa, a country still be-devilled by major challenges of inequality twenty one years after the end of apartheid, which itself caused structural, economic and social disparity. Additionally, South Africa is one of the most unequal societies in the world with a GINI Coefficient of 0.65 in 2011, unchanged since 2009 (Statistics South Africa, 2014a:35).

The levels of poverty are extremely high, with 45.5% poverty headcount in 2011, with child poverty (zero to seventeen year age group) much higher at 55.7% (Statistics South Africa, 2014a:29). This impact on the development outcomes for children (which is more intense the younger the children are) is critical with regard to the implementation strategies for comprehensive early childhood development services and programmes.

It is against the above mentioned information that the following data create a deeper understanding of the situation in which young children in South Africa find themselves.

#### **2.9.5. Health, Nutrition and Food**

The mortality rate for children under 5 years of age stands at 44.1 per 1,000 live births (Statistics South Africa, 2014:6). This is still higher than the government's target of 30 per 1000 live births for 2030 (RSA, 2011:333).

The infant mortality rate in South Africa is at 34.4 per 1,000 live births (Statistics South Africa, 2014b:2). Most children (76.9%) in South Africa, from birth to 4 years of age, rely on a public health care system (82.8% black children, 66% coloured children, 35,7% Indian children and 11.7% white children) for their health care needs (Statistics South Africa, 2013:57).

The National Health and Nutrition Examination Survey of South Africa shows that under-nutrition of young children, especially the one to three year olds, is a cause for a grave concern. In 2012 one in four (26.5%) children in this age group were stunted (26.9% and 25.9% for boys and girls respectively), 9.5% were severely stunted, 2.2% were wasted, and 6.1% were underweight (Statistics South Africa, 2013). It is a concern that stunting and severe stunting increased by 3.1% from 2005 to 2012 and



severe underweight in the same period. In the same breath there is a concern regarding overweight and obesity amongst young children in South Africa (Shisana, Labadarios, Rehle, Simbayi, Zuma, Dhansay, Reddy, Parker, Hoosain, Naidoo, Hongoro, Mchiza, Steyn, Dwane, Makoae, Maluleke, Ramlagan, Zungu, Evans, Jacobs, Fabe, & SANHANES- 1 Team, 2013: 206, 211).

Overweight and obesity amongst young children in South Africa is 22%, more than double that of children in Morocco, Swaziland, Botswana, and Nigeria, and 10% higher than similar aged children in America (Shisana *et al.*, 210). Access to food remains a challenge for young children, as 28,9% of young children (0 to 4 years) found themselves, in 2012, in households where they ran out of food (31.5% of Black African children and 25% of Coloured children compared to 2% and 2.3% respective for Indian and White children) (Statistics South Africa, 2013:61).

#### **2.9.6. Standard of living**

Statistics South Africa's report on South Africa's young children (2013:32-33, 51, 56) states the following in respect of their standard of living:

- Young children (birth to 4 years) find themselves in households where only 35.8% have access to piped water in the dwelling and a further 2.9% have piped water in the yard.
- Less than 50% of young children (0 to 4 years) have access to a flush toilet (48.2%) and chemical toilet (1.1%). More than 40% of the children in this age group have to rely on pit latrines (20.9% without ventilation and 19.7% with ventilation), and 5.8% of young children find themselves in households with no sanitation system.
- Only 50.8% of young children live in households where the municipality or local authority removes the refuse, whereas the rest rely on community members that remove the refuse or use the household's own dump.
- Data indicate that 54.1% of young children rely on household income that comes from salaries/wages or own business, while the main source of income of 30.9% households is grants. Infants (44%) and 1 to 2 year olds (62.2%) are less likely to receive child support grants compared to older children, e.g. 3-4 year olds (67.1%).

- Young children living with their mothers or with neither parents are more likely to receive the child support grant (73.1% and 68.9% respectively) than children living with both their parents or with their fathers.

### **2.9.7. Early Learning, Development and Care**

In 2012 about one in three (35.7%) young children (birth to 4 years) attended an ECD centre, representing 57.4% of 3 to 4 year olds, 28.1% of 1 to 2 year olds and 7.2% of infants (younger than one year) (Statistics South Africa, 2013:29). More recently, Statistics South Africa (2014c:16) indicated that 34.4% of children birth to 4 years attended (in 2013) a Grade R class/Pre-school/Nursery school/crèche/educate centre and about 11.9% are in the care of a day mother (child minder). The two data intervals show a 1.3% decrease, which is not that significant in terms of coverage.

The Minister for Social Development (Dlamini, 2014:3) indicated in April 2014 that the number of children receiving a subsidy from the state to attend an early childhood development programme had increased by more than 100,000 from 2009 to 2013 (from 432 727 in 2009/10 to more than 545 347 in 2013). She also indicated that, in 2012/2013, 21,023 ECD centres were registered compared with 16,250 in 2009/2010, showing an increase of 4,953 over the past five years. Children in formal urban areas generally have greater access to ECD centres (42.4%), compared to children in informal urban areas (Statistics South Africa, 2013:29-31). The South African Human Rights Commission and UNICEF's report in 2011 indicates that children in the poorest quintile are two times less likely to attend an ECD programme (South African Human Rights Commission and UNICEF, 2011:41).

In 2012 more than nine out of ten (92.7%) young children had both their parents alive, only about 1% were double orphans (both parents deceased) and 6.2% had lost either a mother (1.2%) or a father (5%). However, only 36.4% of young children lived with both parents. The majority lived with either their mother (42.5%) or with neither parent (18.7%), and only 2% lived with their fathers (Statistics South Africa, 2013:24- 25). Poor children are least likely to live with both parents (South African Human Rights Commission and UNICEF, 2011:51).The above literature review indicates that

investment in children and realising the rights of the young children in South Africa are yet to be achieved. This does not only create a developmental risk for the individual child, but also for the broader society as it will have a consistent impact on social and economic outcomes.

#### **2.9.8. Governance in ECD**

In analysing governance issues related to the provision of ECD services in South Africa, Viviers *et al.* (2013) gave the following as reasons for South Africa's failure to meet the needs of its young children efficiently and effectively:

- Poor institutional arrangements;
- Insufficient inter-sectoral collaboration, coordination and service integration; and
- Limited accountability at all levels and across sectors.

It is argued that governance in the delivery of early childhood development is the key ingredient for the successful implementation of services and programmes for young children (Britto, Yoshikawa, van Ravens, Ponguta, Oh, Dimaya & Seder, 2013:10). It is against this background that the Presidency commissioned the 2012 diagnostic review of early childhood development. The said review highlights specific gaps in the governance of ECD provisioning in South Africa. According to Richter *et al.*, (2012:18-34), these gaps are follows:

- Different sectors working in isolation “without shared vision, goals and accountability”;
- Absence of strong and assigned leadership;
- Limited accountability for the realisation of the rights of young children;
- Lack of information systems that provide quality data on the early childhood development services; and
- Poor institutional arrangements.

In the same vein, Martin (2012:3-5) adds that poor funding policies, lack of adequate monitoring and weak infra-structure are major gaps encountered in the governance of ECD centres in South Africa.

The South African 2005 to 2010 National Integrated Plan for ECD indicates, through its analysis, that governance issues, such as fragmentation in policy and uncoordinated service delivery, had an impact on services to young children, which is why there was the necessity for an integrated plan (RSA, 2005:5-6). Viviers *et al.* (2013:37) argue that despite the intention of the 2005 to 2010 National Integrated Plan for ECD, “its life span was not adequate to facilitate the intended transformation of a very complex, fragmented and poorly resourced sector”, but it did entrench some principles that relate to issues of good governance, namely coordination and collaboration between state departments.

In view of this, the findings will be verified against what is stated in the literature. This will be done in Chapter 4.

## **2.4. THEORETICAL FRAMEWORK FOR THE PROVISION OF ECD SERVICES**

A theory can be viewed as a “set of interrelated constructs, definitions, and propositions that represents a systematic view of phenomena by specifying relations among variables, with the purpose of explaining natural phenomenon.” (Kerlinger, as cited in Cresswell, 2009:51). Maxwell (2013:48) views theory as a set of concepts and ideas that are intended to capture something about the world. A theoretical framework was vital for a study in that it provided a plan and map for the study. Moreover, it served as a lens or perspective for the study (Cresswell, 2009:62).

The theoretical framework was a vital aspect of the research proposal owing to the fact that it challenged the researcher to demonstrate an understanding of the main philosophical assumptions regarding the matter being studied. Theoretical insights were important as they shaped the foundation of reasoning about a research field and topic. The developmental approach was the lens from which the researcher conducted this study. This approach will be unpacked as follows.

### **2.4.1. Developmental Approach**

ECD forms part of social service provision mechanism in South Africa. According to Patel (2005:66), the present social services in South Africa cannot be discussed without referring to the country’s historical background. Before 1994, the South African social welfare system used both the residual and institutional approaches to welfare service

delivery, both of which were anchored on “colonialism, discrimination and apartheid” (Lombard and Kleijn, 2006:229).

The residual approach identifies the family and private market as the intervention for meeting needs, with the state providing minimal intervention (Patel, 2005:24). This approach is based on a conservative philosophy which recognises that it is an individual’s responsibility to meet his/her own needs (Patel, 2005:22). The institutional approach, however, identifies social welfare as the role of the state (Midgley, 2000:365). Thus, the residual approach is based on limited state intervention with the most responsibility being on the individual whilst the institutional approach is based on the assumption that the state should provide long-term intervention on a large scale (Midgley, 1999:2; Lombard, 1996:164).

The country’s shift to a developmental approach materialised in 1995 when the South African government, together with 70 other countries, participated in the World Summit for Social Development. South Africa signed a declaration to confirm its commitment to adopting the social development approach to social welfare (International Council on Social Welfare, 2000). This newly-adopted approach shifted from the previously used residual and institutional approaches which were both treatment approaches to adopting a developmental approach which was inclusive of the participation of the poor in socio-economic development (Lombard, 2003:224).

Contrary to the previous approaches, the social development approach combines both the institutional and residual approaches through focusing on integrating both approaches and including the participation of the government, private sector, civil society and partnerships between individuals, groups and communities as interventions to social service delivery (Patel, 2005: 30). This shift was in line with the movement from an apartheid government to a democratic one which ensured the empowerment of individuals, families and communities to be self-reliant and to deal with their social conditions (Proudlock, Dutschke, Jamieson, Monson & Smith, 2008:17).

Based on the approaches discussed above, the social development approach shifted South Africa's social service delivery from a treatment approach to a developmental approach which combines both the institutional and residual approaches. In addition, this approach ensures that service users are empowered to participate in the sustainable socio-economic development of the country.

The developmental approach to social welfare services recognises the need for an integrated and strength-based approach to service delivery. Its primary condition is that, whichever method or approach is used, the outcome must be to promote social and economic justice (Policy on Financial Awards to service providers, 2005).

ECD services were formulated in a way that ensures that ECD services are rendered from a developmental approach. A developmental approach is underpinned by empowerment and human rights-based perspectives (Midgley, 2010:16; Patel, 2005). This study has employed a developmental approach embedded in empowerment and human rights paradigms as its theoretical framework, the rationale being that the study was within the domain of children's rights to ECD. Moreover, a human rights approach is in itself an informative approach for the developmental social welfare that the ECD services seeks to further (Midgley, 2010:16; Proudlock & Jamieson, 2008:35). The provision of ECD services is a human rights issue. According to Ife (2012:19), "By human rights we generally mean those rights that belong to all people [*all children*], regardless of national origin, race, culture, age, sex or any other characteristic."

The key principles of the developmental paradigm are indicated in Midgley (2010:16) and Patel (2005:106) as universal access, participation, self-reliance, social integration, empowerment, appropriateness and accessibility. These principles are in alignment with the principles stipulated in the CoT ECD funding policy which CoT should apply when funding ECD centres. The developmental approach has five themes (Patel & Hochfeld, 2008:195). Three themes only applied to the context of the study. The applicable themes were as follows.

## **Rights-based approach**

This theme is about the attainment of social justice and equality in terms of access to resources. The United Nations (2006:15) defines a human rights-based approach as:

A conceptual framework or the process of human development that is normatively based on international human rights standards and operationally directed to promoting and protecting human rights. It seeks to analyse inequalities that lie at the heart of development problems and redress discriminatory practices and unjust distributions of power that impede development progress.

This approach upholds and protects the rights of people and makes use of the collaboration of the human rights principles which include non-discrimination, accountability, human dignity, participation and transparency. These principles are incorporated into planning and practice as well as policy. This approach also addresses the equitable shift of power relationships as well as the empowerment of individuals (Androff, 2016:26).

The ECD services should be implemented in line with the rights-based approach. The rights-based approach seeks to safeguard the human rights of the service users. The fact that the children are enrolled in ECD centres indicates the respect for their right to education. The services provided by ECD centres should strive towards providing the children with a safe environment at the centre. The bill of rights points out that everyone has the right to a safe environment, and every child has the right to education. The bill of rights also makes it clear that the best interests of the all children should be vital in every matter concerning the child.

### **2.4.2. Socio-economic development**

This focuses on marrying economic policies with social development policies. The marrying of social development with economic development in the ECD sphere is an attempt to achieve social justice. The Integrated Service Delivery Model seeks to ensure

that services delivered to the clients should at all times promote social justice. Social justice ensures an equity of resources and services to every individual. When making budget allocations for ECD centres, it is important to ensure equality and equity in service provision. As previously indicated, an investment in ECD results in net economic gains later in life.

#### **2.4.3 Collaborative partnerships**

The theme focuses on the inclusion of governmental, non-governmental and commercial actors in playing a role in the enhancement of the wellbeing of members of a society. The theme also entails the cultivation of the participation of service users and stakeholders to enable them to have a decision-making voice. These themes are important because all developmental welfare programmes and policies are based on them. These themes were, thus, also used to initiate ECD services within a developmental approach. In exploring the reasons for the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, the principles and features of a developmental approach are paramount as they inform the type of strategies to be adopted, the levels of intervention, and the forms and types of partnerships to be involved (Midgley, 2010:17). Within the context of a developmental theoretical framework, the above principles and features guided the study in terms of children's rights to protection and development.

#### **2.11. SUMMARY**

In summary, it is evident from the aforementioned arguments that the provision of ECD service is a critical social and economic investment in South Africa. Early child development has become an important aspect of the society as child-focused approaches are being developed and strengthened. The acknowledgement of the significance of Early Child Development (ECD) corresponds with a development of the body of scientific evidence that supports the prominence of the first years of human life. The policy prescriptions indicate various roles for local municipalities in the implementation of ECD services. It has emerged from research at a national level and, in particular, at an international level that governance and funding for early childhood development services need attention and, this, in particular in relation to the role of local municipalities in governance. Funding for ECD has become one of the critical aspects in



the development arena. It is, therefore, imperative that different government departments and the private sector community look at the best ways to fund ECD programmes.

## **CHAPTER THREE: RESEARCH METHODOLOGY**

### **3.1. INTRODUCTION**

This section covers a detailed description of how the qualitative research process was applied to understand the compliance of Mamelodi ECD centres to the CoT ECD Funding Strategy. The chapter will focus on the research methodology, research approach, research design, population and sampling, preparing participants for data collection, method of data collection, pilot testing, data analysis and data verification.

### **3.2. RESEARCH METHODOLOGY**

The term 'research methodology' denotes the methods, techniques and procedures used in the process of conducting a scientific study. Polit and Hungler (2004:233) are of the view that methodology denotes the ways of obtaining, organising and analysing data. This line of thought is also shared by Burns and Grove (2003:488) who state that methodology includes the design, setting, sample, methodological limitations, and the data collection and analysis techniques in a study.

Henning (2004:36) also echoes similar sentiments and describes methodology as articulate group of methods that match one another in a bid to deliver data and findings that will reflect the research question and suit the researcher's purpose in responding to the research question and accomplishing the research goal. It is imperative that the researcher should give an account of the methods, strategies and procedures employed in the execution of a scientific study (Maree & Van der Westhuizen, 2007:34).

In this section, a description of the methodology utilised in the study will be done. There are three different types of research approaches, namely qualitative research, quantitative research and mixed methods research (Fouché & De Vos, in De Vos *et al.*, 2011). A detailed description will be made of qualitative research approach since it was the most suitable approach for the study. Thereafter, a research design will be described; this will entail a description of the different research designs, namely explorative, descriptive and contextual research designs.

### 3.3. RESEARCH APPROACH

This section will give a descriptive explanation of the qualitative research approach and its characteristics. It will also explain when it is necessary to use a qualitative research approach. Finally, the justification and appropriateness of a qualitative research method for the study will be discussed.

According to Yates (2004:138), “Qualitative research explores how the individual or group members give meaning to, and express, their understanding of themselves, their experiences and/or their world”. The qualitative research approach is a flexible approach which does not provide the researcher with a blue-print of how the study should be conducted. Burns and Grove (2003:356) note that a qualitative research approach is a systematic and subjective approach used in describing and giving meaning to life experiences. They further note that the qualitative approach is mostly associated with words, language and experiences rather than measurement, statistics and numerical figures (Burns & Groves, 2003:356). A similar view is shared by Merriam (2009:13), who states that qualitative researchers are interested in understanding the meaning people have constructed, that is, how people make sense of their world and the experiences they have in the world.

Qualitative research is an all-encompassing word for research procedures aiming to describe, explore and explain a person’s experience, interactions and social contexts in the absence of statistical procedures but rather through textual data (Fouché & Schurink, in De Vos *et al.*, 2011:308). Neuman (2006:157) states, “Qualitative researchers borrow ideas from people they study and place them within the context of a natural setting”. Creswell (2009:104-105) agrees and states that qualitative research seeks to “discover”, “develop” “explore”, and “describe” a certain phenomenon. In this study, the researcher will use a qualitative approach. Fouché and Schurink (in De Vos *et al.*, 2011:308) state that, “The qualitative approach aims to understand, observe, explore and obtain a realistic and descriptive perspective from respondents who have direct experience of what is being researched.”

There are several characteristics that are inherent in a qualitative research approach. According to Creswell (2009:175-176), they are as follows:

- ***Research is conducted in a natural setting***

The qualitative researcher collects data in the field and on the site where participants experience the issue or problem under study. Dale (2006:19) alludes to the naturalistic characteristic of qualitative research, where studies are conducted in a real-world situation. The researcher thus goes to the participant's natural setting (Kielborn, 2001:21). The researcher contacted the participants individually and interviewed them face to face in their ECD centres where they operate, talking to them directly and observing their verbal and non-verbal behaviour.

The researcher focused on learning from participants as they described and explained their own challenges with regard to complying with the City of Tshwane funding strategy and those were interpreted by the researcher within their natural setting.

- ***The researcher is the main instrument in collecting data***

The researchers in qualitative research strive to understand the subjective world of participants from their frame of reference. The researcher remains the key instrument in the facilitation process. Qualitative researchers collect data themselves by interviewing participants. The researcher collected data from principals of ECD centres in Mamelodi by using a semi-structured interview guide to explore their challenges in complying with the CoT funding strategy. Patton (2002:11) postulates that any understanding of the phenomenon in qualitative research needs to consider the researcher's personal experience and engagement in the process.

- ***Researchers gather data from multiple data sources instead of relying on just a single source***

Qualitative researchers gather multiple forms of data. The researcher used a semi-structured interview schedule to collect information. Semi-structured interviews, according to Greeff (2011: 43), allow the researcher to explore the participants' views, opinions, attitudes and belief about certain events and phenomena. In the semi-

structured interviews, the researcher used open-ended questions focusing on different aspects of the particular research, as stated by Donalek (2005:124).

The design for individual interviews included a pre-interview preparation task as well as a semi-structured interview guide. The researcher prepared questions in advance that she explored with colleagues with experience in the ECD field before contacting research participants. Interviews offer researchers access to people's ideas, thoughts, and memories in their own words rather than in the words of the researcher (Hesse-Biber & Leavy, 2011:98).

Then the researcher reviewed all the data, made sense of it, and organised it into categories or themes.

- ***Data analysis is an inductive process***

Qualitative researchers build their patterns, categories, and themes from the bottom up by organising the data into increasingly more abstract units of information. The researcher collaborated with a data coder and the study supervisor interactively to shape the themes that emerged from the mass of information that was collected.

- ***Researchers are attentive to the participants' denotation of the phenomenon under study***

According to Creswell (2009:175), "in the entire qualitative research process, the researcher keeps a focus on learning the meaning that the participants hold about the problem or issue, not the meaning that the researcher brings to the research or writers expressed in the literature". The researcher learned from the ECD principals about their challenges in complying with the CoT ECD funding strategy.

The researcher focused on gaining a holistic account from the participants, trying to develop a comprehensive picture of the issue under study.

- ***Qualitative research is holistic and interpretive***

Furthermore, qualitative researchers believe in multiple realities (Denzin & Lincoln (2011:4, 24). This view is supported by Streubert, Speziale and Carpenter (2007:21),

who state that qualitative researchers are primarily interested in the participants' viewpoints.

The researcher's understanding of qualitative research is that it is an inquiry approach that is useful for exploring and understanding a central phenomenon. To learn about this phenomenon, the researcher asks participants broad, general questions, collects the detailed views of participants in the form of words and analyses the information for description and themes. From this data, the researcher interprets the meaning of the information, drawing on personal reflections and past research. The structure of the final report is flexible, and it displays the researcher's biases and thoughts (Creswell, 2002:58). The method focuses on the exploration of human behaviour and searches for understanding through people's actions.

Based on the above discussion, the researcher found the qualitative approach suitable for this study. The decision to adopt a qualitative study was also influenced by the writings of Johnson and Christensen (2008:34) and Lichtman (2006:7-8) who state that a qualitative approach is opted for in the following situations:

- The purpose of the study is to understand and interpret social interactions;
- The research objectives are to explore, discover and construct;
- Data are gathered through open-ended responses, interviews and field notes;
- Data analysis is conducted in order to identify patterns, features and themes;
- Human behaviour is viewed as dynamic, situational, social and personal; and
- The study is conducted from a wide-angle lens which seeks to examine the breadth and depth of phenomena.

There was no significant information on the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. As such, this is a topic which required an in-depth exploration. The qualitative approach was, therefore, the most appropriate for the study. A qualitative approach is more concerned with the "what" questions, which is exactly what this study sought to answer (Fouché & De Vos, in De Vos *et al.*, 2011:95).

In addition, the researcher intended to acquire an understanding of the reasons and not to explain them; this was best fulfilled within a qualitative approach (Fouché & Delport, in De Vos *et al.*, 2011:65).

The research design that was adopted to realise the goal of the study is discussed in the following section.

### **3.4. RESEARCH DESIGN**

A research design is viewed by Coldwell and Herbst (2004:35) as a provider of “The glue that holds the research project together.” Nieuwenhuis (2007:70) sees it as, “A plan or strategy ... specifying the [how and from where participants will be selected], the data gathering techniques to be used and [how] the data collection will be done”. Green and Thorogood (2009:42) are also of the view that a research design attempts to specify the what, how and why of data collection. This line of thought is supported by Welman, Kruger & Mitchell (2005:52). Leedy and Ormrod (2013:94) view a research design as being a strategy demonstrating how the study will be conducted and analysed.

A research design is important because it “involves a set of decisions regarding what topic is to be studied among what population, with what research methods, for what purpose” (Neuman, 2006:35). It also focuses on the steps undertaken to achieve the planned project, including decisions regarding the type of sampling to be employed, the data gathering procedure and data analysis.

A research design can be described as a map the researcher used in order to answer the research question. Kerlinger (in Kumar, 2005:84) defines a research design as being a plan, structure and the strategy of investigation. According to Fouché and Delport (2011:64), as well as Leedy and Ormrod (2005:94), a research design is a plan to guide the researcher in collecting, analysing and interpreting observed and collected data. In line with these authors, Mouton (2001: 74) specifies that a research design is a plan or blueprint of how the researcher intends to conduct research.

A research design focuses on how the research will be done. According to Babbie and Benaquisto (2010:79), the researcher “needs to determine what he is going to observe and analyze, why and how”. It indicates the means by which the researcher expects to

reach the research objectives. Explorative, descriptive and contextual research designs were used for the study. These designs are discussed as follows.

#### **3.4.1. Explorative research design**

The explorative style of inquiry is used to learn more about issues where little is known (Fouché & Delport, in De Vos *et al.*, 2011:95). It is used to instigate a process of building knowledge about a problem (Neuman, 2006:34). Grove, Burns and Gray (2013:46) explain explorative research as being conducted to gain newer insights and knowledge on a topic. In the study, an explorative research design was used to explore the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi.

Explorative research focuses on the “how” and the “why” questions (Fouché & De Vos, 2005:106). Burns and Grove (2003:313) define exploratory research as research conducted to gain new insights, discover new ideas and/or increase knowledge on a phenomenon. The exploratory research refers to “research in which the primary purpose is to examine a little understood phenomenon to develop preliminary ideas and move towards a refined research question by focusing on the ‘what’ question” (Neuman, 2006:23). According to Neuman (2006:34) explorative researchers must be creative, open minded and flexible, adopt an investigative stance, and explore sources of information, though the research rarely yields definitive answers.

Exploratory studies are typically done for three purposes, namely to satisfy the researcher’s curiosity and desire for better understanding, to test the feasibility of undertaking a more extensive study and to develop the methods to be employed in any subsequent studies (Babbie & Benaquisto, 2010:80).

The researcher asked creative questions by using semi-structured interviews in an interview guide to explore the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. The researcher will help to determine what further research can be done with principals regarding their experiences in relation to the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. The researcher’s aim is to gain new insight, discover new ideas and/or increase knowledge of experiences of compliance with the CoT ECD funding strategy, and from these



experiences the researcher makes recommendations pertaining to the improvement of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

### **3.4.2. Descriptive research design**

The descriptive design is used to offer a thorough description of what was explored (Neuman, 2006:34). This line of thought is supported by Fouché & Delport, in De Vos *et al.* (2011:96) who state that descriptive research focuses on conducting an intensive examination of phenomena, so leading to thicker descriptions. According to Kreuger & Neuman (2006:23), descriptive research focuses on answering the “why” and “how” questions. In this study, the researcher employed the descriptive research design towards describing the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

Descriptive research refers to research studies that have, as their main objective, the accurate portrayal of the characteristics of persons, situations or groups (Polit & Hungler, 2004:716). In descriptive research the researcher tries to determine the “how or why” of the research, while in the explorative research design the researcher answers the “what” question. Descriptive research is defined by Neuman (2006:35) as a “Research in which the primary purpose is to “paint a picture” using words or numbers and to present a profile, a classification of types, or an outline of steps to answer questions such as whom, when and how”.

Streubert Speziale and Carpenter (2003:22) state that a descriptive method in data collection within qualitative research is central to open, unstructured qualitative research interview investigations. The researcher studied the experiences of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

### **3.4.3. Contextual research design**

Contextual research is about identifying what occurs in the society and the way a society displays itself (Ritchie & Lewis, 2005:27). Contextual research design focuses on specific events in naturalistic settings (Burns & Grove, 2003:32). The same sentiments are echoed by Neuman (2006:158) who states that the meaning of social action is derived

from the context in which it occurs. In the study, the researcher employed a contextual research design to contextualise the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.

The contextual research design is concerned with identifying what exists in the social world in the way it manifests itself (Ritchie & Lewis, 2005:2007). Qualitative researchers emphasize the social context for understanding the social world, Burns and Grove (2003:32) point out that contextual studies focus on specific events in “naturalistic settings”. Naturalistic settings are uncontrollable real-life situations sometimes referred to as field settings. According to Neuman (2006:158), the meaning of social action depends on the context in which it appears. The researcher noted what surrounds compliance with CoT funding strategy by ECD centres in Mamelodi. This means that the study was conducted within the ECD centres in Mamelodi. Research was done in a natural setting and this refers to an enquiry done in a setting free from manipulation (Streubert Speziale & Carpernter 2003:363).

The research population and sampling methods used to produce a most suitable sample are described in the following section.

### **3.5. POPULATION AND SAMPLING**

The concept “population” is defined by Rubin and Babbie (2007:153) as “That aggregation of the elements from which the sample is actually selected”. This definition is similar to the one provided by Neuman (2006:222). Babbie (2007:111) views a population as the perfectly specified collection of study elements from which a sample is drawn. In addition, a population denotes individuals in the universe who have specific characteristics such that they can be called a sampling frame (Rubin & Babbie, 2011:356).

The population for this study were all principals of ECD centres in Mamelodi that were funded by the CoT from 2009 to 2015. The rationale for this was that funding started in 2008 and the first year was simply about getting systems in place. Starting from 2009 would, therefore, provide a clearer picture. 2015 was chosen as the cut-off date for consideration owing to the fact that it would mean that the ECD centre would have been

funded for seven years and this provides a basis for properly determining its compliance status.

There are seventy CoT-funded ECD centres in Mamelodi. The principals are mostly females; it is, therefore, imperative to note that this is a phenomenon that is female dominated. In a qualitative study, it was not feasible to include the population in its entirety (Cooper & Schindler, 2014:338). As such, the researcher drew a sample.

A sample is a subset of the population that will be selected for the study (Sarantakos, 2005:139). Babbie (2011) gives a similar view regarding a sample and states that a subsection of measurement is drawn from a population of interest in order to understand the study population. The size of the sample was not determined at the onset of the study but was determined by the saturation of data. The researcher opted to use a non-probability sampling technique, namely purposive sampling. Purposive sampling is discussed in the following section.

### **3.5.1. Purposive sampling**

The researcher employed purposive sampling. According to Strydom and Delport (2011:392), purposive sampling is the kind of sampling that enables the researcher deliberately to seek distinctive and divergent data. Rubin and Babbie (2005:247) state that purposive sampling is also known as judgemental sampling. This purposive/judgemental sampling is important for the study in that “a sample of information rich participants” will be selected (Grinnell & Unrau, 2008:153). Utilising purposive sampling, a sample of principals of ECD centres in Mamelodi that received funding from the CoT was selected by the researcher. The reason for this was feasibility in terms of access to the centres, resources and time to conduct the study.

### **3.5.2. Sample size**

The objectives of the study and the characteristics of the population under study determine who should be selected for the study (Mack, Woodsong, MacQueen, Guest & Namey, 2005:5).

The researcher drew a sample to select principals of ECD centres using the following selection criteria:

***The principal of an ECD centre must:***

- Be willing and available to participate in the study;
- Be a principal of an ECD situated in Mamelodi;
- Be employed in the ECD in MAMELODI;
- Have received funding from the CoT between 2009 and 2015;
- Be registered in terms of the relevant Children's Act; and
- Be presently responsible for and implementing an ECD programme.

As indicated above, the advantage of the purposive sampling was that it allowed the researcher to be in control of choosing who the participants were (Rubin & Babbie, 2011:355).

The study was conducted at Mamelodi, a township situated near the eastern suburbs of the CoT. There seemed to be an uneven spread of ECD centres in Mamelodi, with approximately 23 in Mamelodi West and 47 in Mamelodi East. From practice, the principals in both sections of Mamelodi (West and East) seemed to be experiencing the same challenges as far as compliance with CoT ECD funding strategy is concerned.

The process the researcher followed in gaining entry to City of Tshwane is illustrated below:

**3.5.2.1. Table 1: Steps Followed in gaining entry to COT**

Office	Gate Keeper	Response
City Strategy and Organisational Performance	Mrs. Malebo Moatshe	Permission granted
CoT Social Development: Community Development office	Mr. Tinyiko Maluleke	Permission granted

After approaching the different managements in the CoT and receiving permission to conduct the research study on ECD centres that they funded, the researcher requested contact details for the principals for the respective ECD centres. The researcher was able to visit Mamelodi and requested the principals of the different ECDs to participate in the study. Logistical details regarding the date and time for the appointment were disseminated to the ECD principals closer to the time of data collection.

No sample size was set at the outset of the study but data was collected until a point of saturation was reached (Creswell, 2013:189) and then participant recruitment was terminated. Data saturation refers to the process of gathering and analyzing data up to the point where no new insights are being observed (Gibson & Brown 2009).

### **3.5.3. Preparing participants for data collection**

Data collection is vital in any research process (Creswell, 2009; Babbie, 2009). The method and process of data collection helps the researcher to comprehend the world from the view of the participants.

In preparation for data collection, the researcher first negotiated access with the City of Tshwane; upon gaining access the researcher engaged appropriate ECD principals and the board members of the ECD centres in Mamelodi (Creswell, 2013:151).

Once permission had been granted, the researcher approached participants and gave them all relevant information regarding the study as well as spelling out the ethical considerations relevant to the study, specifically the principle of voluntary participation (Creswell, 2013:154). Data were collected by means of conducting semi-structured face-to-face interviews, aided by open-ended questions contained in an interview-guide. 'Data' is a plural word; its singular is 'datum'.

In order to create a conducive environment where the researcher could facilitate the process of exploration and description of participants' experiences in relation to status of compliance to the CoT funding strategy, the participants had to be prepared for data collection. After identifying the participants, the researcher informed them about the study in preparation for their participation, and appointments were made with them for the actual interviews.

The participants were interviewed in their own ECD centres to avoid travelling time for them. This was also done to ensure that they were in a familiar environment and to allow the researcher to observe their natural environment, which is one of the characteristics of qualitative research. Even if the researcher knew participants by their names she had to clarify her role for the purpose of the study. The researcher followed the guidelines by Rogers and Bouey (1996: 131) to explain the aim, goal and purpose of research.

- *Explain the purpose of the research.*
- The researcher explained the purpose of the study to the participants as a study which aimed to develop an in-depth understanding of the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.
- *Explain to them why the researcher wants them in particular to participate in the study*
- The researcher further clarified why principals of ECD centres in particular had been chosen to participate in the study. The primary reason was that, as principals of ECD centres in Mamelodi, they had first-hand experience and knowledge about the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi.
- *Explain the value of their participation and contribution to the study.*
- The value of the study was explained to principals of ECD centres. The focus was on the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. The value was, thus, to gain an in-depth understanding of their experiences in relation to compliance with the CoT ECD funding strategy. The knowledge gained from this study would directly inform the future compliance with CoT ECD funding strategy.
- *Explain to participants how the data will be collected and what will be asked of them.*
- The researcher provided participants with questions in advance, to prepare them for the interview.
- *Inform the participants about where the interview will take place.*

- The researcher met with individual participants, negotiated and clarified where the interviews would take place. The most convenient place for the purpose of this study was the offices in their ECD centres, the natural setting where participants did most of their day to day work.
- *Indicate to the participants, the time and the length of the interviews*
- The researcher informed the principals of ECD centres that the estimated time for the face-to-face semi-structured interview was between 45 minutes and an hour each.
- *Inform participants about record keeping during the process of data collection.*
- In order for the researcher to focus fully, she requested the permission of the participants to audio record the discussion. The interviews were audio-recorded with the permission of the participants and then later transcribed. The audio records were secured in a locked drawer in the office where the researcher was the only person who had access.

The following section discusses the methods and procedures used in collecting data from the participants.

#### **3.5.4. Method of data collection**

The process of data collection entails obtaining the research participants in accordance with a chosen sampling procedure (Sewell, 2006:1). The chosen data collection method must be suitable in view of the research problem and specific population concerned. To extract in-depth information from CoT funded ECD centres in Mamelodi, City of Tshwane on the status of compliance with the CoT ECD funding strategy, the researcher conducted semi-structured face-to-face interviews with principals of respective ECD centres.

Semi-structured face-to-face interviews were conducted to collect data as they are the major mode of collecting information in qualitative research studies (Neuman, 2006:34). Permission to record the face-to-face interviews was requested from participants. Hesse-Biber and Leavy (2011:98) regard semi-structured interviews as the only way to allow for greater flexibility and to produce rich data, by allowing the interviewee to pursue areas of

interest that arise throughout the interview. The process credits interviewees with the power and ability to narrate their own experiences; it encourages their agency, sense of personhood and ability to affect their own Lives.

The researcher made use of open-ended questions contained in an interview guide to investigate the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi. The concept 'interview-guide' refers to a list of topics, themes, or areas to be covered in a semi-structured interview (Mason, 2002). An interview guide is normally created in advance of the interview by the researcher and is constructed in such a way as to allow flexibility and fluidity in the topics and areas that are to be covered, the way they are to be approached with each interviewee, and their sequence (Mason, 2002). Bickman (2009:10) argues that this should happen in a natural environment for practical significance. The data collected assisted the researcher to comprehend the world from the participants' point of view (Greeff, in De Vos *et al.*, 2011:347). The data that were gathered were then saved to a memory card for storage purposes.

During semi-structured face-to-face interview sessions, the researcher utilised an interview guide to ask open-ended questions (Neuman, 2006:250). Hesse-Biber and Leavy (2011:94) regard open-ended questions as being an efficient way to obtain information needed to describe people's thoughts, opinions and feelings. Open-ended questions are also regarded as not being premised on previously conceived answers, but well suited to exploratory studies (Bless & Higson-Smith, 2000:115-120).

The advantage of using interviews was that they were inexpensive and generated speedy results (Rubin & Babbie, 2011:467). However, the disadvantage of using face-to-face interviews was that they generated voluminous and less systematic data that was difficult to analyse (Creswell, 2009:192). The researcher counteracted this by carefully adhering to the facets of qualitative data analysis.

Interviewing skills used by the researcher included the use of active listening, reflection, clarification and questioning and summarising. The researcher also used non-verbal communication and the skill of observing non-verbal cues of participants. The skills were applied as follows:



**3.5.4.1. Table 2: Description of Interview skill utilised**

<b>Skill</b>	<b>Description and how it was used</b>	<b>Purpose</b>
<b>Active listening</b>	The researcher listened to the content, voice and body language of the person speaking. The researcher also communicated that he/she was listening.	To be aware of what participants are feeling and thinking even when not speaking
<b>Reflection</b>	The researcher reflected, by means of restating a comment, that he/she was showing an understanding of the content, the feeling behind it or both.	<p>To help participants become aware of what they are saying.</p> <p>To communicate that the researcher is aware of what the participant is feeling.</p> <p>Reflection deepens understanding and communicates that the researcher is in tune but that deeper delving is needed.</p>
<b>Clarification and questioning</b>	<p>The researcher used several basic communication skills here: questioning, restating, and asking participants to clarify.</p> <p>The researcher took jumbled information and used statements to reorder and clarify key issues.</p>	<p>To clarify what a participant is saying.</p> <p>To help a participant to become aware of what he/she is saying</p> <p>To maintain clear communication.</p>

<b>Summarising</b>	Summarising is an essential skill because material in a discussion is generated from a wide range of viewpoints.	<p>Helpful especially when participants speak uninterrupted for several minutes.</p> <p>Allow the researcher to stay with the issue or move on.</p> <p>To make transitions from one topic to another.</p> <p>Pull together major points.</p> <p>Sharpen or tighten the focus.</p>

In conducting interviews, the researcher made use of the interview-guide (refer to addendum E). The following are the questions the researcher asked during the interview:

### **Biographical Data**

- Gender (Observed);
- Position in the ECD Centre;
- Number of Years of Experience in the ECD field;
- Year the ECD Centre was established;
- Whether the ECD centre is registered;
- Total Number of staff in the ECD centre;
- Total number of Children in the ECD centre; and
- The year in which the ECD was funded by COT.

### **Open-ended questions**

- Tell me about your experiences related to the CoT ECD Funding Strategy.
- What is your understanding of the purpose of the CoT ECD funding strategy and the funding requirements?
- What were some of the needs that you identified and included in your application for funds?
- What compliance issues did social workers share with you as the basis for the funding of your ECD centre?
- Tell me more about how you utilized the funds that you received from CoT to benefit your centre?
- What helped you to comply with the CoT ECD funding requirements?
- What made it difficult for you to comply with the CoT ECD funding requirements?
- What human resource challenges did you encounter in complying with the CoT ECD funding strategy and requirements?
- What, in your view, can be done to address the challenges that you experience in complying with the CoT ECD funding requirements?
- What support do you need from the City of Tshwane to be effective and to comply with the ECD Funding requirements?
- What role should the social workers play in assisting the ECD centres to comply with the ECD funding requirements?

The following section discusses pilot testing methods that were used in the study.

### **3.6. PILOT TESTING**

A pilot study is an explicit pre-testing of research instruments, including interview guides, in preparation for their full-scale use (Van Teijlingen & Hundley, 2002:1). The researcher views pilot testing as a preparatory activity before the actual research can take place to ensure that the data collection will generate relevant information to answer the research question. According to Bless, Higson-Smith and Kagee (2000:155), a pilot study is “a small study conducted prior to a large piece of research to determine whether the methodology, sampling instrument and analysis are adequate and appropriate”. Yegidis and Weinbach (2002:206) state that the process of pilot testing a measurement instrument with a few individuals who are similar to the research participants can help to make measurement more reliable.

Using the same criteria for recruiting participants for the main study, the researcher pilot tested an interview guide on the principals of two CoT funded ECD centres, one in Mamelodi East and one in Mamelodi West. The information obtained from the pilot test was not used in the main study but assisted in providing input necessary for the reviewing and final formulation of the semi-structured interview questions (Greeff, in De Vos *et al.*, 2011:370). The researcher gauged her research interviewing skills during the pilot testing.

Doing a pilot study was advantageous in that it gave the researcher a taste and feel of what the real study was to be like. Moreover, it enlightened the researcher on the feasibility of the study in terms of time, money and the willingness of participants to participate in the study. Should the interview-guide have appeared to be unsuitable during the pilot study, another procedure for collecting data was to be considered and other pilot studies were to undertaken until the researcher was satisfied with her data gathering instrument (Strydom, in De Vos *et al.*, 2011:243). This was, however, not done owing to the fact that the interview guide appeared to be suitable during the pilot study, and it was indeed suitable for the study.

Johnson and Brooks (2010:395) are of the view that a pilot study can ensure that methods proposed for the main study would work in practice. The pilot test allowed the researcher to identify any problems and possible elements that needed to be changed. This helped the researcher to assess the contents, accuracy and appropriateness for the target group. Prior to participating in the pilot test, the principals of selected ECD centres were asked to sign informed consent letters. The pilot interviewing also allowed the research to practise her qualitative interviewing skills and to gauge her skills in this regard.

The following section discusses the method that was used to analyse qualitative data.

### **3.7. DATA ANALYSIS**

Data analysis can be viewed as the procedure of bringing structure and meaning to the bulk of collected data (Marshall & Rossman 1995:11). This view is supported by Schurink, Fouché & De Vos (in De Vos *et al.*, 2011:397). There is a need to interpret collected data

so as to convert them into meaningful information. Babbie (2007:378) describes qualitative data analysis as, “The non-numerical examination and interpretation of observations, for the purpose of discovering underlying meaning and patterns of relationships”, while Walliman (2011:60) regards data analysis as a quality control exercises that assists researchers to choose the best and most relevant pieces of information to be used.

In analysing qualitative data, the researcher utilised the eight steps of data analysis as suggested by Tesch 1990 (in Creswell, 2013:198). This process unfolded as follows:

- The researcher wrote down word for word the audio-taped interviews. After, having completed this process, the researcher read through all of them to get a holistic view.
- The researcher selected one transcribed interview which seemed to be the most interesting; she then interrogated it, focusing on the underlying meaning of the responses and not on the content of the information. She then wrote down her thoughts in the margin of the page.
- Upon completing the reading of all the interview transcripts, the researcher grouped similar topics together under the categories of “unique topics”, “major topics”, and “leftovers”.
- Thereafter, the researcher devised abbreviations for each of the identified topics. In addition, she did a preliminary classification outline to determine whether new categories and codes had emerged.
- Then the researcher found the most descriptive wording for the topics and turned them into themes and classifications.
- A final decision on the abbreviation for each theme was then made by the researcher.
- Then researcher then assembled the data belonging to each theme in one place and started doing a preliminary analysis.

- Finally, the researcher recorded data and then started to report on the research findings.

The methods of data verification are discussed in the following section.

### **3.7.1. Verification of data**

Methodological verification is the process of having other experienced researchers verify the logic and implementation of each step of the methodology. Because qualitative research is more flexible than other forms, it often happens that important changes take place after the study has begun (Bless, Smith & Sithole, 2013:239). According to Bulpit and Martin (2010:7), data verification is an activity for determining whether the researcher's conclusion is accurate. In a bid to establish the trustworthiness of a qualitative study, researchers advocate for strategies that enhance credibility, dependability, conformability, and transferability of data (Creswell, 2009:192-201). The strategies used by the researcher to verify data are discussed below.

### **3.7.2. Credibility of findings**

The researcher strove to improve data credibility through repeated sessions until data saturation occurred, as suggested by Creswell (2009:192). In addition, the researcher read interview transcripts numerous times until she captured accurate descriptions of the status of compliance by ECD centres in Mamelodi with the CoT ECD funding strategy. Moreover, participant validation was the most important technique for establishing credibility, as suggested by Creswell (2009:191). It entailed sharing findings with the participants in order to allow them the opportunity to interrogate the findings and confirm that the researcher had correctly interpreted the data (Creswell, 2014:201).

### **3.7.3. Dependability of findings**

Dependability refers to the reliability of research findings and is similar to the concept of reliability in quantitative research. According Creswell (2009), dependability refers to how stable the data are. The researcher enhanced data dependability by using the

independent coder to code the data. This was compared with the researcher's findings to determine whether similar results had been achieved.

#### **3.7.4. Confirmability of findings**

The researcher strove to ensure the conformability of data by ensuring the following: the study happened in a real life setting; a representative sample was selected; and the study can be replicated within a different context (Leedy & Ormrod, 2013:101). In addition, conformability was further ensured by employing the following strategies: spending extensive time in the field; providing thick descriptions of data; seeking opinions of colleagues to determine whether they agreed or disagreed with the researcher's data interpretation and analysis; and by respondent validation (Leedy & Ormrod, 2013:104).

#### **3.7.5. Transferability of data**

The researcher strove to provide rich and thorough information regarding the description of the research setting (context) and observed transactions and processes, in-depth discussion of findings and themes as a mechanism of ensuring rigour and transferability of data to other settings (Shenton, 2004:69).

### **3.8. CHAPTER SUMMARY**

This chapter has covered a detailed description of how the qualitative research process was applied to understand the compliance of Mamelodi ECD centres with the CoT ECD Funding Strategy. The chapter has focused on the research methodology, research approach, research design, population and sampling, preparing participants for data collection, method of data collection, pilot testing, data analysis and data verification.

## **CHAPTER FOUR: PRESENTATION AND DISCUSSION OF RESEARCH FINDINGS**

### **4.1. RESEARCH FINDINGS**

In this section, the biographical details of the participants are first presented, and thereafter a summary narrative analysis is provided. The findings from semi-structured interviews are discussed by means of themes and sub-themes, which will also be presented below. The discussion and analysis of data will be supplemented by the words of the participants by means of direct quotes. Furthermore, the findings will be verified with the literature. At the outset of this research project, the following research objectives were formulated:

- To explore and describe the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs (centres/ managers?); and
- To describe the findings regarding the status of compliance with the CoT ECD funding strategy by the Mamelodi ECD's (centres/ managers?).

In order to realise these objectives, in-depth semi-structured interviews were conducted with eight (8) principals of ECD centres operating in Mamelodi. The demographic particulars of the research participants, namely the principals of ECD centres operating in Mamelodi, are discussed below.

#### **4.1.1. Biographic Profile**

The biographic profiles were constructed by drawing information from the participants on the following:

- Gender;
- Number of Years of Experience in the ECD field;
- Year the ECD Centre was established;
- ECD centre registration status;
- Total number of staff in the ECD centre;
- Total number of children in the ECD centre; and
- Year in which the ECD was funded by CoT.



#### 4.1.2 Biographical profile of participants and ECD centre

In order to ensure confidentiality and anonymity the pseudonyms of participants were used. In addition, only alphabetical codes were utilised.

**4.1.2.1. Table 3: Biographical profile of participants and ECD Centre**

Pseudo Name of Participant and Gender All Females	Participant's Years of Experience As Principal	ECD Registratio n Yes/No	Year ECD Registered	Total number of children in the Centre	Year ECD was Funded	Number of Staff members in the ECD Centre
D	12	Yes	1995	+/-50	2010	5
F	+/-19	Yes	2007	60	2009	6
K	23	Yes	2008	56	2010	6
L	23	Yes	2008	56	2010	5
N	28	Yes	2007	16	2008	4
A	20	Yes	2013	45-50	2012	4
S	20	Yes	2013	+/-50	2007	4
T	19	Yes	2007	16	2008	4

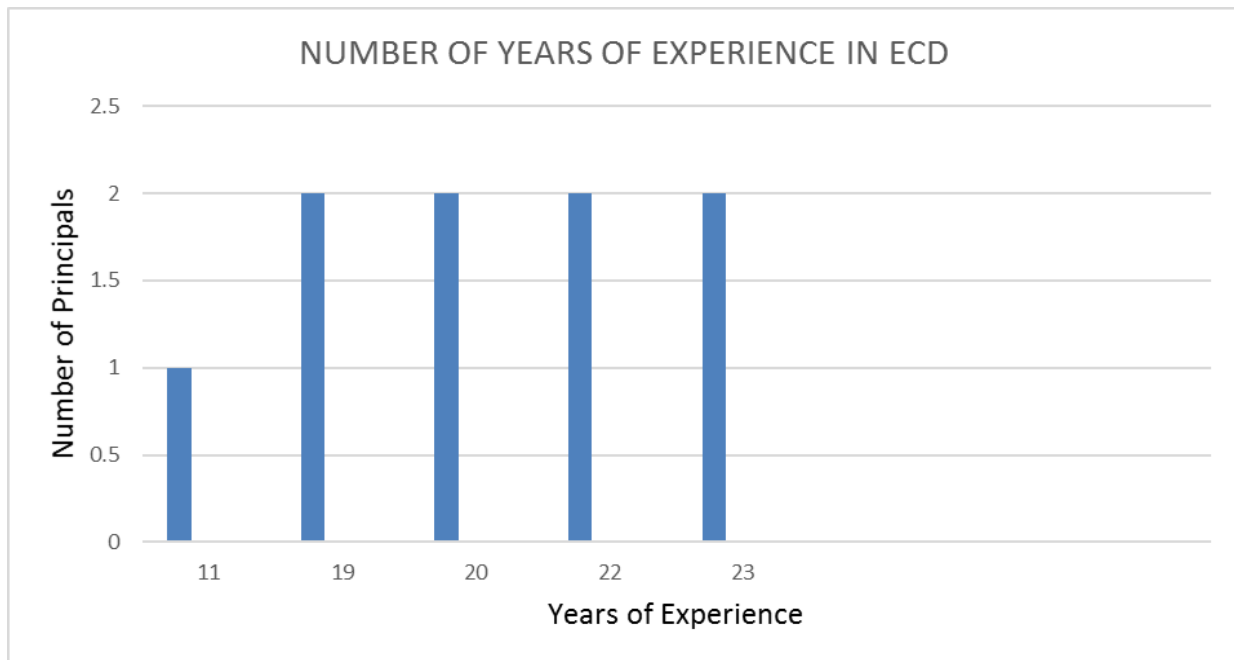
#### **4.1.3. Gender of participants**

The eight principals who participated in the study were female. Though the gender disparities have no impact on this study, evidence indicates that there are more females than males involved in early childhood development. This is mainly because ECD is a field associated with mothering and, therefore, it is considered natural for women to be more involved whereas men interested in ECD may be considered perverts or/and there are fears of allegations of child abuse by men (Yang, 2014, p 5). Mashiya (2014) argues that, in the South African context, male foundation phase teachers can play an important role by working with young children as many children grow up fatherless or without a father figure in their lives.

#### **4.1.4. Number of years of experience in the ECD field**

Of the eight (8) participants: one had eleven (11) years of experience in the ECD field; two had nineteen (19) years of experience, whilst the other two also had twenty (20) years respectively. One participant had twenty (22) years of experience. Two participants had twenty three (23) years of experience in the ECD field. These data show that the participants had extensive experience working in ECD centres, and a review of literature indicates that the experience, skills and knowledge of ECD educators are very important as they determine the extent of learning a child will experience as well as being prepared for entry into school (Sheridan, Edwards, Marvin, & Knoche 2009).

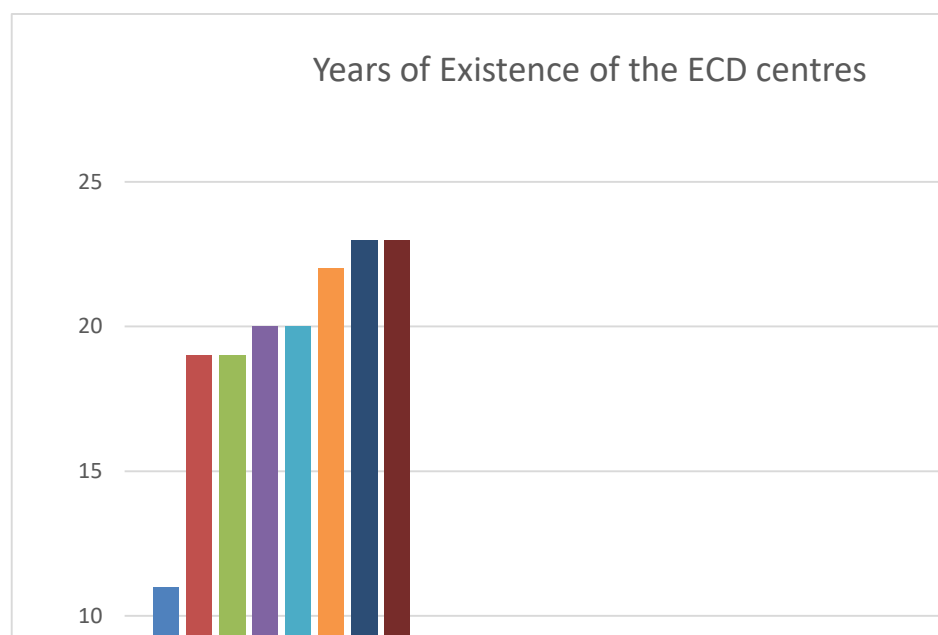
#### 4.1.4.1. Graph: ECD years of experience



#### 4.1.5. Year the ECD centre was established

The years in which the ECD centres were established correlated with the principals' number of years of experience in the ECD field. Of the eight (8) centres: one had been in existence for eleven (11) years; two were established nineteen (19) years ago, whilst the other two had been around for twenty (20) years. One centre was established twenty two (22) years ago. Two centres were established twenty three (23) years ago.

#### 4.1.5.1. Graph: year the ECD centre was established



#### 4.1.6. Registration of ECD centre

All eight (8) ECD centres that formed part of the study were registered accordingly. It is beneficial for an ECD centre to be registered as it is able to operate legally and uphold the prescribed norms and standards according to the Children's Act (Parliament of South Africa, 2006). Registered ECD centres may qualify for a subsidy and can have access to free capacity building and other programmes offered by the Government (Parliament of South Africa, 2006).

#### 4.1.7. Total number of staff in the ECD centre

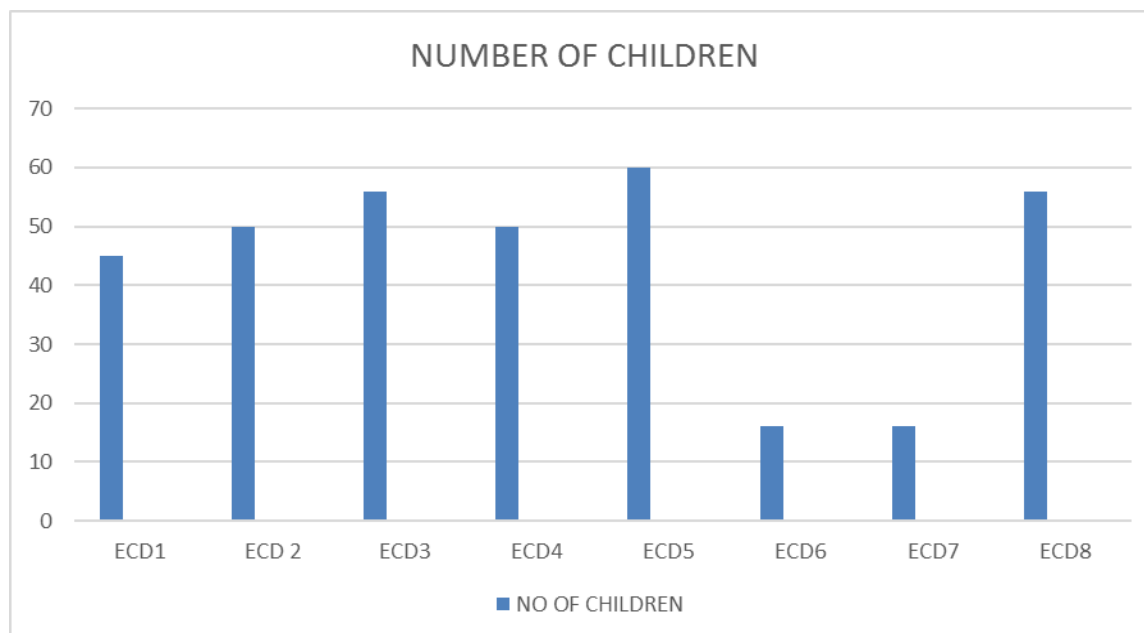
During the time that the eight (8) ECD centres received the CoT ECD funding, four (4) of the centres had four (4) staff members, two (2) centres had five (5) staff members, and two (2) centres had six (6) staff members.

#### 4.1.8. Total number of Children in the ECD centre

A depiction of the number of children in each ECD centre during the time they received CoT ECD funding. Though some of the ECDs were not sure of the exact numbers of the children they had had at the time, they were able to give estimations. Only two ECDs had twenty (20); (Check this. I had to guess; did I get it right?) ECD6 and ECD7 had sixteen (16) children each. ECD1 had forty five (45) children, ECD2 had ECD4 each estimated

that they had had fifty 50 children. ECD5 had had sixty (60) children, whilst ECD7 had fifty six (56) children. When taking into account the teacher/children ratio one can see that there were more children than teachers in most of the ECDs except for ECD6 and ECD7. Manyike (2012) postulates that, in the case of children between the ages of 24-36 months, one teacher ought to be allocated for every four children. Regulation 27 of the Children's Act puts in place specific requirements for the number and qualifications of staff working in ECD programmes (Berry, Jamieson & James, 2011). The national norms and standards stipulate the staff/children ratios in ECD programmes based on the ages of the children. For children 0 - 18 months there must be one teacher for every six children; 18 months - 3 years it's one teacher to twelve children; for those between the ages of 3 - 4 years the ratio is one teacher to 20 children; and for those 5-6 years it's one staff member for thirty children (Berry, Jamieson & James, 2011). When taking into account the teacher/child ratio as suggested according to the national norms and standards one can safely argue that there were more children than teachers in the ECDs except for ECD6 and ECD7 (Berry, Jamieson & James, 2011). It is also important to note that the study did not group the children by age group in order to be able to determine whether the staff/child ratio in the different centres was in line with the Department of Social Development guidelines.

#### 4.1.8.1. Graph: number of children



#### 4.1.9. Year in which the ECD centre was funded by CoT

Of the eight (8) ECD centres that formed part of the study, ECD1 received the CoT ECD funding in 2009, whilst ECD2 and ECD3 received it in 2010 respectively. ECD4 received it in 2011, whilst the ECD5 received it in 2012, ECD6 received it in 2013, ECD7 in 2014, and then, finally, ECD8 in 2015.

*The years of funding of the ECDs by the City of Tshwane can be illustrated as follows:*

Number of ECD Centres	Year of funding	ECD CENTERS
1	2009	ECD1
2	2010	ECD2 & ECD3
1	2011	ECD4
1	2012	ECD5
1	2013	ECD6
1	2014	ECD7
1	2015	ECD8

#### **4.1.10. The CoT compliance structure and requirements**

The following are five critical COT compliance requirements for ECD funding that the ECD centres were instructed to comply with. The ECD principal, as the recipient of the fund, was required to:

- Spend according to the budget allocation and follow the rules;
- comply with purchasing of equipment;
- be in possession of a health certificate in kitchen, sick room and play rooms;
- not have overcrowded rooms and keep to the ratio of teacher to child; and
- ensure that they attend training.

#### **4.2. KEY THEMES**

Upon completion of data collection, the researcher used the eight steps of data analysis, as suggested by Tesch 1990 (in Creswell, 2013:198), to analyse and code the qualitative data. As data were processed and analysed, there were recurrent themes and sub-themes that emerged. As participants shared with the researcher specific trends, and patterns emerged. The findings will be supported by direct quotations in order to give voice to the views of participants. Moreover, the key findings will be highlighted and substantiated with a literature control.

During the process of data collection (i.e. in-depth semi-structured interviews), the questions used as a guideline to structure the interviews with the principals of the ECD centres can be found in the addenda below. From the data analysis process the researcher identified the following themes and sub-themes from the transcripts as depicted in the table below.

#### 4.2.2.1. Table 4: Themes and sub-themes of interviews with ECD principals

Themes	Sub-themes
<b>1.The Participants' Understanding and Experiences of CoT ECD Funding Strategy</b>	1.1 Limited understanding of the ECD funding strategy; 1.2 Dissatisfaction with how funding was allocated; 1.3 CoT funding benefited participants.
<b>2. Infrastructure Development</b>	2.1 CoT funding not addressing ECD Primary needs; 2.2 Misconceptions on the purpose of CoT funding; 2.3 Lack of proper needs assessment of ECDs.
<b>3. Power Relation between the ECD Centres and City of Tshwane</b>	3.1 Participants limited decision making powers; 3.2 Rushed funding application process.
<b>4 How ECD centres utilized the allocated funds</b>	4.1. Staff training; 4.2. Material needs in the ECD centre; 4.3 Renovation of physical structure.
<b>5.Stakeholder Role and Support</b>	5.1 Stakeholder engagement; 5.2 Collaborative efforts amongst stakeholders.
<b>6. Role and Conduct of Social workers in ECD Centres</b>	6.1. Making unrealistic demands; 6.2 Human resource challenge; 6.3 Unprofessional Conduct.



<b>7. Recommendations on Improved Social Work Role and Responsibility</b>	7.1 Assessment and identification of real ECD centres needs;  7.2 Providing guidance and support;  7.3 Being hands on;  7.4 How to support and help families involved in ECD centres;  7.5 Special understanding on backyard centres.
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In the next section of this discussion, each one of the main themes and accompanying sub-themes will be presented and confirmed or endorsed by direct quotations from the transcripts of the interviews. The identified themes and sub-themes, with their supporting storylines from the transcripts, will be compared and contrasted with the body of knowledge, namely the literature control.

#### **4.2.3. Theme 1: Participants' Understanding and Experience of the CoT ECD funding strategy**

The focus of this study, as outlined in chapter one, was to look at the non-compliance status of ECD Centres in Mamelodi. It was, therefore, vital to assess the full understanding of the participants regarding COT funding strategy. The researcher was guided by the interview schedule in gathering the participants' understanding of the strategy. This was to assess fully the challenges related to non-compliance as a percentage of the funded ECD centres did not follow the required official budget spending as stipulated by the COT. The participants' understanding of, and experiences with regards to, the CoT funding strategy ranged from being limited to negative and positive experiences. Their responses are outlined under the following sub-themes.:

#### 4.2.3.1. Sub-theme: 1.1 Limited understanding of the ECD funding strategy

This section looks at the participants' reflection on their understanding of the purpose of the COT ECD funding. It further looks at the participants' challenges and their experiences with regard to the funding structure and allocation of the budget line item.

There were mixed findings with regards to the participants' understanding of the ECD funding strategy. The study shows that there was some level of understanding of the COT funding strategy while a large number of participants reported limited understanding of the funding strategy and the requirements. One of the challenges brought forward by the participants is that they were given funding for things that did not address their immediate needs. The other challenge was that the funds they received had to be used strictly according to the stipulations of ECD funding requirements. As a result, some of the participants struggled to comply as they failed to understand the stipulated line items for this funding. This participant outlined and expressed her challenges as:

*“The money was supposed to be used according to the ECD strategy and rules...We could not do otherwise we had to toe the line and do whatever they wanted but then it did not help us as the funds did not address our needs. We wanted to paint and renovate our Day care centres and buy many things. Renovation were needed in many of our centres as they are in a bad state .Our centres are in a poor state”.*

(As these are direct, verbatim quotations I cannot correct the grammatical errors.)

Another participant indicated that:

*“But I did not get all the things I needed, because I also wanted to renovate my crèche, but they didn't approve it...They then tell me about the food we've been receiving, and state that I must try to get support from the department of health for other funding ...”.*

The above quotations indicate that the participants needed the money for more than the funding was stipulated for. This highlights the participant's unhappiness with the funding strategy as they have limited understanding of its purpose. The participants struggled to understand why the money had to be divided the way it was divided and also why a bulk of it had to go to training that the recipients had already received.

The other challenge was that the participants were not guided or informed about how to apply for funding in other departments. The lack of coordination and of an integrated approach to funding was experienced in this process. According to Viviers *et al.* (2013), South Africa is failing to meet the needs of its young children efficiently and effectively because of the lack of inter-sectoral collaboration, coordination and service integration. The 2010 National Integrated Plan for ECD did highlight the lack of coordination and poor policies with regards to service delivery to young children (RSA,2005:5-6).

The COT funding mission was to ensure that ECD managers receive comprehensive support for both the children and the teachers. The aim of the fund was to improve the services in the centres and to support the teachers with relevant skills (CoT, 2008:8). Therefore, the allocation of the funds for training was in line with the mandate of the funding strategy. The participants main concern was the R40 000 allocated for training. This was not well explained to them. The non-compliance in the training requirement could be associated with the individual principal's frames of reference and perceptions regarding the CoT management requirement.

The issue of compliance was critical for COT funding as the Municipality is required to keep to the required funding structure. This is stipulated in their policies and will require compliance even during auditing period by the finance unit of the COT. Many funding agencies outline, in their policy document, funding process and procedures which are based on the organisational vision, mission and objective. They document their requirements for the application of grants and expect grantees to comply. The process of application starts with the two parties building a good relationship over time before funding is allocated. Most funding organisations give detailed guidelines and procedures

with regard to this aspect in a written form. Contracts are presented in the form of a signed agreement. Funding agencies also develop manuals for applicants to read, outlining roles and responsibilities with the partner's role outlined. According to the Kellogg foundation funding manual (2001:31), the programme director is appointed to manage and support the funded organizations and is responsible to review and present the proposal, undertake a site visit and finalize the proposal in a structured funding meeting to ensure accountability for the funding received. The grantee is expected to manage the funds according to the stipulated procedures and to report to the foundation on a quarterly base on the spending of the funds. According to the participants, the COT funding strategy did not clearly outline the procedure in detail.

In the context of this study, it is important to note that most of the funding for ECDs is directed towards ECD centres which meet the Department of Social Development (DSD) partial care facility and programme registration requirements, and it is calculated per child per day for children between 0-4 years. The other part of the funding goes to NGOs for ECD programmes such as training and operating subsidies. According Sachs,Biersteker,Magoge, &Ishwardutt, Roseisha( 2018 p.5), the system for ECD registration is very complex and tends to be a burden for both the DSD officials and the applicants largely owing to poor access to information for reporting and planning purposes. This could be one of the main reasons why some participants had a limited understanding of the funding strategy.

In South Africa, social workers play a critical role in the ECD service delivery. They have to simplify and explain the funding policy and assist the grantees in complying with COT funding requirements. They are also required, as stated in chapter 2, to play different roles to ensure that the quality of services that children in ECD centres receive is good (Sachs, *et al.*, 2018:29). Patel and Hochfeld (2013) state that the roles of developmental social workers are established in national welfare policies but there is a gap between the theory and practice of these roles. In this study, the researcher learned that the social workers from CoT are responsible for identifying, screening, preparing and supporting the ECD principals with funding. They are also responsible for doing follow-up and for

monitoring and ensuring accountability from the ECD. These roles will be discussed further below in theme 6.

#### **4.2.3.2. Sub-Theme 1.2: Dissatisfied with how funding was allocated**

As outlined in chapter one, there are four critical line items for the COT Funding. One of the line items is allocated for training. Training, according to the COT, is critical as this will enrich teachers to be able to serve the children as they will apply skill and knowledge in the ECD centre. Some of the participants reflected negative experiences regarding the training fund and how it was allocated. The voices of participants regarding the reasons that contributed to the negative experience are as follows:

*“When we received the funding they told us that they will give us R100 000 to buy food, toys and many things...And they further instructed us to deposit R40 000 in the standard bank account for training. This was confusing for us as we were not happy to deposit this money in the bank.*

As outlined in the story line above, some of the participants were dissatisfied with how the training was introduced to them. They were instructed to deposit funds in the bank. This contributed negatively to their understanding and was confusing. The other contributing factor was that the training was not relevant to their needs. They felt that they were being trained only for the sake of training as proper training needs and assessment were not conducted. Social Workers did not identify training needs prior to insisting that people should undergo training. According to the National Integrated Plan for ECD (2005:200), training needs assessment should be identified before the trainees go for training. The participants felt they were not consulted about what they needed for training. As reflected above many have more than 20 years' experience in the ECD field. Some felt that the training they attended was wasteful. The irrelevant training that the participants were complaining about is reflected in the quotations below:

*“They told us they are going to teach us First Aid and also how to teach children and also how to balance our books and everything...But when we went there, it*

*was not like that...We further more didn't receive any teaching certificates from those people...the training was not right.*

Unsatisfactory service is indicated in the following comments.

*"I mean, we were supposed to be allowed to buy what we wanted, but by coming to us and telling us to go and buy mattresses...I mean I did have some blankets, I did have some of the sponges...But they didn't ask me, 'Do you have blankets or do you have sponges?'...But they pushed me and said this money must buy sponges and blankets, you see".*

The findings regarding negative experiences stem from a lack of assessment and rushed consultative processes. The ECD managers were never given an opportunity to discuss their real needs. No rapport existed and the relationship was not well developed. The grantee and funder partner relationship between the ECD centres and the CoT used a top down approach characterised more by instructions than explanation and discussion. As a result of the nature of the relationship, the City of Tshwane as a funder failed to outline and explain the funding procedures and requirements in detail. This caused tension between the two parties. As Richter, Biersterker, Burns, Desmond, Feza, Harrison, Martin, Saloojee and Slemming (2012:18-34) argue, one of the gaps in the ECD sector is that different sectors work in isolation, without a shared vision, goals and accountability where did this quotation start?. This usually causes divisions. It created a negative relationship that divided them as "them", and us as "us" and caused power imbalances in partnerships. Midgley (2010:17) states that the collaboration between governmental, non-governmental and commercial actors should cultivate the participation of service users and stakeholders to enable them to have a decision-making voice. The lack of co-operation and collaboration in the ECD sector is a challenge as there are a number of stakeholders who do not consider the community involvement and consultation as being important. According to Schenck (2004), the role of the social worker is to facilitate a healthy partnership that can lead to disadvantaged communities and ECD managers taking ownership and growing. According to the Policy on Financial Awards to service providers (2005), the developmental approach to social welfare

services recognises the need for an integrated and strength-based approach to promote social and economic justice. The social development approach shifted South Africa's social service delivery from a treatment approach to a developmental approach which combines both the institutional and residual approaches. In addition, this approach ensures that service users are empowered to participate in the sustainable socio-economic development of the country.

#### **4.2.3.3. Sub-Theme 1.3: CoT funding benefited other participants**

Outside of the challenges which have been highlighted in the sub-theme above, there were some participants who were able to identify the positive experiences and benefits from the CoT ECD funding strategy. Some of the positives which came with receiving the CoT ECD funding include the receiving of goods and assets previously needed by the ECDs. The quotations below highlight the participants' experiences.

*"I received a stove, the stove was bought for the crèche, and we bought a computer..."*

*"They checked that we were doing the right things about the money, where the equipment we have bought are and things...they were right and they were very kind to us".*

*"You see this chair I bought with that money some chairs are broken now, I bought tables and I bought mattresses do you see them?"*

*"I used the money properly I did not eat even a cent of that money."*

A similar, positive experience regarding gardening was also explained as to how it was well received and established. The City of Tshwane encouraged the centres to start vegetable gardens with the funding. This was well received by some participants as stated below:

*We bought plants and tools, the spade, spade fork and the other tools...and we bought the seeds and we went to the school to ask for the space and we did all that and later we took the receipt and gave it to the social workers".*

Some participants further elaborated on how the funding had enabled them to learn about gardening as follows:

*“I experienced many things like they taught me how to plant a garden...”*

*“...by buying chairs and sleeping mattresses, proper educational toys. Children must learn because children learn by playing...like I bought a television...Yes they told us to buy television set and so that they see these cassettes. Even now I am still using the television set...I also bought toys I went around making quotation so that the money that they have us can be used properly”.*

This participant utilized the funds appropriately to ensure that the children learn through play, a core component of the National development plan 2030. The Strategic Plan (2015-2020) outlines that all young children should have access to safe age-appropriate and inclusive play, recreational and cultural environments and facilities, especially young children living in poverty in under-serviced, rural areas and informal urban areas (Republic of South Africa, 2015:64). The positive experiences that the participants referred to is driven by many factors. They explained that other social workers facilitated good training and workshops that assisted the participants to understand the funding policy and, therefore, managed to help and assist the participants to implement the COT strategy correctly. This means there was compliance and commitment to COT requirement

For some participants there were mixed feelings with regards to their experience when it came to utilizing the funds. They reflected on their experience as being both positive and negative. This is somewhat to be expected as the participants underwent various processes within the funding structure, and some of these experiences made them happy while others did not. This resulted in ambivalent feelings and experiences which have been categorised as normal.

The story lines from the interviews indicating the general experiences as follows:



*“The experience was both positive and negative...Because I have many qualifications and when I applied for funds they sent me for more training even though I am already over qualified... I completed a course on management at TUKS. I have many certificates but they just took me for extra training again. I don’t get it then but the sessions were very nice.”*

This participant seems to have had both a positive and a negative experience, a positive in the sense that she has been taken back to a training course and thought she was initially not happy but she welcomed and enjoyed training. Her ambivalent feeling of both positive and negative feelings was around the idea that she has gathered too many certificates. She felt she was not in a position to go for extra training as she had other needs. She then later realized that one never stopped learning; even though she was over qualified she still needed training in other areas.

The CPD policy, as well as the norms and standards, prioritised the standards required to promote excellent service delivery for social and social auxiliary workers, employers and service providers (South African Council for Social Service Professions, 2019). According to the Department of Social Development (2015:92), training and continuous professional development (CPD Policy DSD) is essential in ensuring that practitioners have expertise in looking after the children and in helping them to develop to their full potential. The need for training and assessment is critical before staff can be engaged in work with the children. The staff did not understand it because they believe they are sufficiently trained and thus did not see the need for further or continuous training but benefited from it without knowing it. The guidelines for early childhood development stipulate that all practitioners involved in dealing with young children and the management programmes and facilities ought to receive ongoing training (The Republic of South Africa, 2006:35).

#### **4.2.4. Theme 2: Infrastructure Development**

Participants were asked to explain their understanding of the purpose of the CoT’s ECD funding strategy. Their responses are grouped into three sub -themes as discussed below. Findings indicate that there is a conflict between the needs of the various ECD

managers or centres, even though the purposes of the funds are stipulated by the City of Tshwane, with participants feeling that they had no choice but to comply with the City's funding requirements despite their misgivings. Funding strategies are developed and debated internally, based on the vision and mission of the organizations. The consultative process with grantees is on selling the idea of how they should comply with these policies but is not on developing the strategy. The COT strategy was designed to support certain aspects of ECD programme and so the need to educate, train, workshop and support the ECD managers to understand the COT funding strategy. Collaborative work in early childhood development across sectors, government departments and societies can promote effective policies that support the development of young children and the integrity of families (Young, 2010).

#### **4.2.4.1. Sub Theme 2.1 CoT funding not addressing ECD primary needs**

One of the grounds of unhappiness the participants expressed during the data collection process is that the funding provided by CoT is for specific purposes and, therefore, cannot be used to address the immediate and urgent primary needs of the different centres. The dissatisfaction and complaints by the participants are likely because they do not have a clear understanding of how the city's funding works and what its purpose is. This is captured in the first theme and sub-themes. The response of some of the participants below captures this:

*“When you get the money of the ECD something that you get you must renovate your crèche. You must build your crèche especially for the teachers they must get the big qualification and we as the principal your crèche must look like the other ones now our crèches are poor...Yes the requirements they sent us, they said you will get the money it is specific for what you need to spend it on. That money they ask us that money you do this and this”.*

Other participants articulated that they had wanted to undertake renovations with the funding to improve the learning environment for the children, but they could not do this as it was not the purpose for the funds they were given.

*“I wanted to renovate my crèche, my crèche did not look well. After receiving the money I wanted my crèche to look like I have received the R100 000 from the City of Tshwane. The value of my crèche should be similar to the money I have received...It must be the value of R100 000.”...I wanted to renovate and buy a ceiling”.*

*We were told that you will go to school to do a course, you will buy the stationery for the kids and the toys for the kids, you will do that and that...That’s all. We did not benefit as we had expected with the whole R100 000”.*

This highlights the need for the CoT to educate and explain its funding strategy to its beneficiaries. According to the responses above, the participants expected the funding from the CoT not only to address their physical needs but also to be a bit flexible in relation to how they are used, allowing ECDs to use the funds according to the needs they would be having at the time when funding is allocated. Many wanted to invest in the renovation utilizing the R100 000 for developing the physical structure of the ECD centres.

Infrastructure is a great challenge within ECDs in South Africa, and it has been noted that most ECD facilities actually function without these basic amenities, such as adequate sanitation (HSRC, 2010). In South Africa, a lot of ECD centres do not have access to adequate infrastructure such as sanitation, electricity and water (Atmore, 2012). In a study conducted in 2010, it was found that many ECD centres are not registered as they do not meet the infrastructure requirements for registration, and these centres usually operate in buildings which are in a bad condition (DoBE, DoSD & UNICEF, 2010:61). The poor state of ECD infrastructure is, thus, not only a cause for concern for the health and safety of the children but it is also related to those ECD centres providing poor quality services (Atmore, 2012).

#### 4.2.4.2. Sub Theme 2.2 Compliance concerns on the purpose of CoT funding

The participants obviously received funding from CoT because they had met the requirements and criteria to be eligible for funding. So when they were asked about their understanding of the CoT funding strategy, the participants stipulated that they thought the funding was for all the items they had stipulate in their applications, and little did they know that it was for specific purposes. One of the issues that a majority of the participants had is that they could not use the funds to refurbish and change the structure and renovate their crèches, despite having highlighted this need in their applications. Below are the similar responses from different ECD principals:

*“The purpose of the ECD funding is to help children, upgrade your centre not by building a wall or what. By buying chairs and sleeping mattresses, proper educational toys. Children must learn because children learn by playing”.*

*“Once you receive funding, I thought it is a must to renovate our crèches, not to make teachers with qualification to feel over qualified. Principal your crèche must be at the same standards with the others, our crèche is very poor”.*

*“Yes, they outlined the requirements and what is needed to receive the funds. They thought the funds we received was for all the items we requested. They basically direct us on how the funds are allocation, and what items we must use for every amount allocated”.*

*“...I can say this, I thought city of Tshwane is helping us to upgrade our crèches but on the other hand as I was looking at it, I mean we were not happy with the way they were treating us...I mean, we were supposed to be allowed to do things that we preferred, but by coming to us and telling us to go and buy mattresses...I mean I do have blankets and sponges”.*

The participants had full understanding that the children have a right to rest and leisure, to engage in play and recreational activities appropriate to their age, and to participate

freely in cultural life and the arts (Department of Social Development, 2015:29). Similar sentiments are echoed in Chapter 6 of the Children's Act 38 of 2005 that *"an early childhood development programme means a programme structured within an early childhood development service to provide learning and support appropriate to the child's developmental age and stage."* That being said these rights the participants argued had already been addressed by other funders and donors, and, thus, they thought the CoT funding was going to help them fix their buildings instead the funds being directed at some items which they already had.

The principals wanted to use the funds for bigger purchases and not typical purchases, such as food and toys. For other items like food, toys, mattresses, they normally receive donations especially for the foodstuff. Companies like Woolworths, Pick 'n Pay and Checkers donate them. They valued R100 000 as a large amount that could do great things in the centres. This is the amount to do bigger things, to buy materials to renovate and re-build solid structures. This sub-theme highlights the importance of multi-sectoral collaboration in order to avoid duplication of funding and services to the beneficiaries. Improved collaboration among provincial and local government and various departments ensures that resources are used effectively and ensures that there is no duplication and that funding gaps are addressed.

#### **4.2.4.3. Sub Theme 2.3 Lack of proper needs assessment of the ECDs**

Participants alluded to the fact that there was no thorough assessment of what the needs of the different centres were. They felt that the administrators of the CoT funding strategy were not flexible but rigid in their approach. They were not willing to accommodate other needs that are specific and unique to each centre. One participant aptly captures this challenge as follows:

*"I wish I could have taken the money that was left in my account, R19 000. I could have built two toilets because the one the children is using is the main toilet. I could have built two toilets and two washing basins for the children...I really did not do anything I did not even buy myself cement or anything else or even paint*

*my house. They told us to write a letter if we wanted to buy a stove or build something. They told us to write a request letter...*

Other participants also felt that if their needs were assessed before applying, it could have helped them identify their major needs. Assessments result in adequate monitoring and evaluation. In this case, it is apparent that monitoring and evaluation were not applied to ensure full understanding of ECD policy and COT strategy. Some participants noted that, even though meetings were conducted, the focus of the meetings was not on participation or decision making, but more on the dos and don'ts of the ECD funding strategy. It is also observed that it was all about getting the task done as some participants alluded to the fact that they were rushed to submit without understanding the purpose of the strategy.

This points out that the City of Tshwane management did not consider looking at the participation model for their funding structure. Participation is not only getting the task done, but it should encourage decision making and consider the community's autonomous power in projects that involve their lives which leads to self-reliance and empowerment (Hope & Timmel:1995).

Furthermore, most participants spoke of the fact that no proper preparatory methods were in place in the funding process. Another participant explained that it was a challenge to make a vegetable garden which the City of Tshwane wanted her to do. Her exact words regarding this matter are as follows;

*"They helped us to have the small gardens; they were concerned about that yes time and again they wanted to see a vegetable garden...Our problem was, we have, what do you call it? Mice...Rats, yes, yes...It was a challenge.*

All participants referred to the training that they had to attend and pay for out of the grant. This training focused on ECD management and first aid. The participants described the training in the following ways.

*“My question is that there was this amount we were not supposed to touch. That money was meant for school...They gave us some people to come and lecture us especially for first aid. We did not have equipment and they were supposed to give us the equipment...We were supposed to go and use it, it was the first aid management classes sometimes we’re supposed to have someone to give us lectures...They said R40 000 is supposed to be used for that [training]... Yes were trying to show them that some of us are still in school doing level 4 and some level 5...So I felt I felt that they wanted to duplicate that...it was a must...We did not benefit that much”.*

*“Yes there was a...40% it was R40 000 that went for education...I did take my teachers there even myself and even one of the community members went there for training but they did not receive any certificate but we did some research to find for the school we were attending on...Only to find out that the streets kids were staying that so it was just a fly by night...the government is the one that find the school for us and they did not allow us to find the schools for ourselves...I still remember they came here and they tell me that Ma’am you must make a means tomorrow or today transfer the money to this account then take your teachers to this training so that they must be educated and the other percentage was used according to what they wanted”.*

Later N. referred again to the training: *“The way Tshwane did to us they give us the first aid box there was no training for and even certificates...At the later stage I had to take the school fees and then go for training”.*

One can, therefore, safely argue that the funding for the ECD centres should be based on the developmental approach where you find different role players, parents, practitioners, government and NGOs collaborating to make it work. The key principles of the developmental paradigm are indicated in Midgley (2010:16) and Patel (2005:106) as universal access, participation, self-reliance, social integration, empowerment,

appropriateness and accessibility. These principles should be in alignment with the principles stipulated in the CoT ECD funding policy that CoT should apply when funding ECD centres

#### **4.5 THEME 3: POWER RELATION BETWEEN THE ECD CENTRES AND CITY OF TSHWANE**

For funding agencies, compliance is critical and must be clearly outlined to the grantees. The participants were aware of the COT funding requirements despite the fact that they were not explicitly communicated to the fund recipients. The word “must” appears in every bullet point of the compliance document which means that the funding from CoT is rigid. The social workers also stated that they have to re-emphasize the importance of the participants’ compliance in their discussions. For example, you must spend according to the rules: you must not buy food. Thus the language used in the compliance documents of the funding left the participants no room to negotiate about how they thought the funds could address their needs.

##### **4.2.4.4. Sub Theme 3.1 Participants Limited Decision making powers**

The participants were of the view that their relationship with the CoT is a top down approach with undemocratic processes employed in how the CoT ECD funding is managed. This kind of approach is in not in line with the principles of the ECD policy which calls for the autonomy of the service providers. The fund administrators did not involve the beneficiaries in decision making with regards to how they could use the funds, and so the participants felt that a top down approach had been used to make key decisions regarding their ECD centres as indicated by the participant responses below.

*“It was their way. I wanted to renovate my crèche and they take the bulk of the funds for training and we did not get the certificate. When they give us that money we could have used it much better” “...I wanted to renovate and buy a ceiling...other money I bought the outdoor play like the swing”.*



*"I wanted to extend because I wanted extra rooms for kids (but)...you are not supposed to."*

*"Because I have many qualifications and when I applied for funds they sent me to go do training when I am already qualified...Like I completed a course of management at TUKS, they told me that they are going send some of us, what they call that place; I forgot the name of the school. And we have not received any feedback". She added later: "Yes, they received our money for the training and did not give us any certificates, when we could have used it on other tasks, to better the education here".*

*"We were told what to do. We were told that you will go to school to do a course, you will buy the stationery for the kids and there is toys for the kids you will do that and that...That's all we did not benefit about the R100 000 at all. The only thing we benefited is that the children they had beautiful toys because we had educational toys...We bought them whatever they wanted especially the toys and only that".*

*"...out of R100 000, the only money that I used is R60 000...For food, for some equipment for outside and inside, for toys, then books and then some of the furniture also that we wanted. We tried to get some of the furniture...I went to the swop shops, because they are cheaper...they are cheaper, unlike going to the shops and making a big instalment that you won't be able to afford...you see, yah like their basin, I went there to look for their basin, I went there to look for the basin at least to put for their toddlers it was something nice, the cot, cot beds I did buy for them...They said educational equipment...I cannot put the kids on the ground...They must sleep on the cots. And I cannot buy the beds...How many beds am I going to buy in one classroom?...at least the cot beds, it was a simple thing".*

The participants could not bend the rules of the CoT funding as they understood that they are important. What the participants wanted was the CoT to consider looking at their real needs as it appeared as if everything was decided from what CoT wanted and not what

the participants needed. The participants understood that there were certain rules regarding what they could buy with the money with which they had to comply with as expressed in some story lines below:

*“The money was supposed to be use according to their rules...We could not do otherwise we had to toe the line and do whatever they want, but then it did not help us a great deal.*

*This money did not benefit us, the worst part is, R40 000 was for training. We paid R40, 000 and another R60, 000 it was divided as follows 20% for children’s food for six to eight months, 5% that was for gardening and also there was a 20% that was allocated for toys that was all.*

The study, therefore, highlights that the participants were given money and told what to use it for and to use it for those specific purposes only, regardless of other needs they may have. This is depicted by the response below.

*“Yes, they gave us all the instructions about the fund and the requirements. Whatever money we received each amount was to be spend for that particular item. They basically directed and told us how to use the funds for food, stationary, toys, training for teachers, garden, and...Nothing else,”.*

According to the participants, the “must comply” phrase was utilized as an emphasis and instruction and, in some cases, a threat for the grantees to comply and not deviate from the rules. Participation in decision making is very important in social development as it ensures that sustainable decisions are made by not only recognising the needs but also communicating the needs and interests of all parties involved in a given incidence, from the decision makers to the beneficiaries (de Fouloy, 2016). The top down approach as evidenced by the dissatisfaction of the participants usually does not take into account the needs of the beneficiaries and the fact that the needs of the ECDs are not standard and will always vary.

### **Sub Theme 3.2 Funding application process rushed**

It came to light that most participants were not given adequate time to apply for funding but instead were given a short time to complete and submit their application forms. This is indicated by the participant below, and it is important to note that rushing the whole process makes it difficult for the beneficiaries to comprehend fully what is expected of them in relation to the requirements of the CoT on how funds were to be used. As a result, the participants were forced to comply despite their having questions or any misgivings.

*“I had to rush run, knock at doors for people to sign for me because It was a matter of urgency...So after submitting the forms the following day we were called to the offices of the City of Tshwane in town. We went there to sign and was briefed on how to use the funds. I was told that I was one of the people who will receive the R100 000 it was divided according to their way...We asked them how that can be. Because the R100 000 was supposed to be used in our day care so that we can so that it can uplift the standard of the day care centre...But only to find that was made to be into percentage.*

Another participant stipulated how they had been given the funding forms on a Sunday and were to submit to the city the following day.

*“The funding lady came Sunday 2009 and she issued forms that I need to fill out for funding. It was frustrating because it was Sunday and I was from church and it was raining and she said to me she wants the board members’ names and signatures and all that and deadline was on the following day. I was supposed to submit them because the deadline was on Monday”.*

The manner in which the funding process was handled for the participants highlights a weakness on the part of the CoT. It did not give the participants adequate time to understand the funding processes or how the funds are allocated. It is also important to note that, when the beneficiaries are rushed, they may not be able to identify and jot

down all their needs clearly as everything is done in haste. As a result the participants felt no proper preparatory method was used to orientate them to the funding processes and to comply. They wanted the funds as they have so many needs in the centres but, if a better method of explaining was utilized, they would be comfortable with the process.

Orienting beneficiaries to the funding processes of an organization highlights participatory development which has been discussed briefly in the subtheme above. Evidence indicates that, if the recipients of the funds are involved in the processes of funding, this can result in a more disciplined use of resources and good funding outcomes (Baker & Hennessy, 2013). Before any funding occurs, therefore, it is important that the funder outline the stages of funding and other processes, such as helping the beneficiaries have an understanding of what the funding is about, how monitoring will be conducted, what the funding is for and when the relationship will be terminated and how, which is in contrast to what happened with these participants with the COT funding.

#### **4.2.5. Theme 4: How ECD centres utilized allocated funds**

##### **4.2.5.1. Sub Theme 4.1 Staff training**

The participants stipulated, during data collection, that the funds were not adequate to address all their needs. For some participants staff training was not an urgent need for their ECDs and the lack of participatory processes resulted in the failure to identify the training needs of the various ECD centres if any. When asked how they had used the R100 000 they had been allocated, they highlighted that R40 000 of that amount had to be used for training and that's what they used it for. All the participants mentioned that they had to comply and go for training, the cost of which had to be paid from their grant of R100 000. This training was provided by an outside service provider which cost R40 000 and covered aspects such as management, administration and first aid, according to participants below.

*“They said R40 000 is not to be [used]...It’s for [training]...and we were trying to show them that some of us are still at school doing level four, some level five...it was a must”.*

*“Because I think the 20% was supposed to be on education which was the R40 000, no it was 40% which is R40 000 which went for education, I did take my teachers there, even myself, even all of the committee members went there for training, but they didn’t receive any certificate up until now. After that we did try to make some research to look for the address for the school we were attending at, only to find that only hobos lived there. It was a fly by night. To my surprise the government is the one that found this place for us. Yes, they didn’t allow us, for ourselves to go and look for schools...I still remember, they came in when I was absent because I was sick, they said ma’am you must make a means to send the money to this account, and take your teachers to these people, that they must be educated”.*

It is important and necessary for the City of Tshwane to fund training according to the training needs of each ECD and their requirements for staff to get training are in line with Regulation 27 of the Children’s Act 38 of 2005 which puts in place specific requirements about the number and qualifications of staff working in ECD programmes. The regulations state that the person applying for registration of an ECD programme must have appropriate qualifications and training.

#### **4.2.5.2. Sub Theme 4.2 Compliance Vs Material Supply/Food/ Security Needs**

##### ***Bought food for children***

There were conflicting views on the parts of the participants about whether the money was to be used for food or not. Some felt that the city had allocated them more than enough money for food and would have loved to use part of it to put a ceiling in the centre but this proposal was rejected.

*“They can’t tell me that buy food for children for R20 000...for the whole year it is for twelve months and if you don’t use it they will come on top of you to use the*

*money. And that time the money must be finished some of the money we use for the fact that it must be finished before you submit your report...Yes and then I remember that I went to them to ask them on how **about I put the ceiling in the day care centre** and they told me that the money is not for the ceiling it is for the food only”.*

On the other hand, there were participants who perceived that the amount allocated for food was not enough as indicated by the participants below.

*“It is R60 000 we have sacrificed and bought toys and food every month. It was about R1 500 for food every month and that money was small for food.”*

*“They then tell me about the food we’ve been receiving and state that I am supposed to get it from the Department of Health.”*

*“And food, at least the kids were eating nice”.*

*“...food was noted even the money was too little...There is food, food is not enough for the kids.”*

Some argued that the money they had been allocated was not to be used for buying food; for instance one participant stated that they had been given money to buy equipment.

*“It was because they told us how to use it, not for food it was for buying the equipment that we needed.”*

There were conflicting views with regards to the participants’ understanding of the allocation of funds for food, but the findings from this study indicate the need for food and other forms of accessing food rather than depending on the CoT funding, especially for disadvantaged communities. South Africa is riddled with food insecurity in relation to poverty with those from disadvantaged communities lacking in the consumption of fruits and vegetables which affects the nutritional needs of children below the age of 5 years (Jowell , 2011). The lack of adequate nutrition for children affects their early childhood development which, in turn, has consequences in their adult life. Food gardens in ECD

centres are, thus, one way of addressing malnutrition in children because adding vegetables from the garden to the centre meals is likely to help free some of the budget towards other food stuff (Jowell , 2011). That being said, the nutritional status of children below the age of 5 is very important and maybe much of the budget ought to go towards this rather than to staff training.

#### **4.2.5.3. Sub Theme 4.3 Physical Structure and Compliance to COT Funding**

##### ***Centre too small to comply with requirements***

Some participants explained that their centres were too small, and they could not therefore comply with the requirements. As discussed previously in this chapter the ratio of children per ECD was 1:5 and thus the following should be considered in the light of the regulations proposed by the Childcare Handbook.

*“Because my space is too small...My backyard is too small, the health certificate wanted me to comply I wanted to renovate and buy a ceiling.”*

*“Because my space is too small...Yes, I have to be located in the garden space, and I wanted the crèche to be renovated, I need a ceiling...And that was not allowed. And they want the crèche to have a sick bay, and our place is too small.”*

The participants also mentioned that it was difficult to comply with the regulations because they did not have the necessary health certificates. These certificates are requirements for the running of an ECD centre and for registering them. The following story lines express the negative impact of participants running their centres with no certificates.

*“Yes, because the government requires our certificate of electricity, and we cannot create that, because we have no money.”*

*“You know what they came to our centre and value our centre I did not have I did not have health certificate all those things...But I qualify for this R100 000...They*

*told me that I qualify for the R100 000 because we have written our needs and we write what we are running short of and what we must do, then I qualify for that money.” Later she added: “They want the health certificate when you have the separate kitchen, sick bay and office but I went to Munitoria to ask for my what do they call it? I have the zoning certificate.”*

*“I could not get the health certificate, if they gave you money and tell you that you in order to comply with the rules and regulation of the City of Tshwane you have to have a kitchen, a sick bay and also you have to have an office but I could not because I did not have a budget for that...Up to so far I do not have a health certificate.”*

*“As I was saying about consent use they give us papers that we must comply to do they know how these things cost why I say this in the same place. They say they want the health certificate. To make the health certificate you must go to the inspector the inspectors must come to you. You fill the form and then they come and check the place and then after they will tell you that remove this door on how much you are earning and how are you doing in your crèche. They will tell you remove this door and put it on the other side, have another class room. These kids are many cut them. Myself I was having 22 before then they tell my crèche is for 16 kids and I must get the health certificate. Then I was asking myself for 16 kids, 2 teachers, cooker, garden by and myself again...Just imagine with 16 kids and then now the inspector will come and say move this window it is not right this thing is not right do it like this...You see it is difficult.”*

As it stands at present, the majority of support for ECD by the government is directed towards ECDs which meet the required infrastructure standards and are able to meet the DSD requirements to be registered as either partial care or programme registration. Most ECDs in informal settlements do not qualify for some funding as they do not meet the DSD requirements. This is a challenge as many children face health and safety risks from poor infrastructure, poor access to resources and poor learning environments



(Barker & Misselhorn, 2014). The participants' sentiments highlight how there are all these requirements and expectations for ECD centres to comply with certain criterion but there is a lack of a framework to respond on a larger scale to the needs of ECDs in informal settlements and there is poor use of available funding for infrastructure development (Barker & Misselhorn, 2014).

### ***Built toilets part of infrastructure need for ECD centre***

One of the requirements to qualify for access to funding is having adequate toilets according to the standards set by the department of Social Development. Building toilets was, therefore, not part of the CoT ECD funding strategy, but the participants highlighted their great need for toilets in their facilities, with one participant indicating how they wished they could divert some of the funding they had received towards building the toilets which was their need at that particular moment, but they did not do this.

*“I used the money properly I did not eat even a cent of that money. During that time I had pressure for children I did not even have toilets...Children must not sit outside because people passing by will see them that is when children are using potties. I wish I could have taken the money that was left in my account R19 000 I could have built two toilets because the one they were using was my main toilet and it was the municipality toilet out of that money I build two toilets and two washing basins for the children.”*

Another participant highlighted how they had used their own personal money to build a toilet. These issues highlight the need for flexibility in the funding provided by the CoT in order to be able to address the various needs of the ECD centres, as in this case where inadequate sanitation is a health hazard for the children.

*“Yah, there were big, big challenges. Even the toilets, even on the toilets even now, because on toilets they say we must have 20 kids for one toilet, and on those toilets you must make a bigger one, for the wheelchair to go inside...And*

*then...for that seat for a wheelchair person, where will I get that money?...So on the toilets I did use a shack to make a toilet...with the school money, my own salary...it's better than nothing, but..."*

### ***Physical structure and over crowding***

Another participant mentioned that it was important to comply with the requirement that the centres must not be overcrowded, not to have too many children, in order to meet the City of Tshwane's requirements for funding, the ratio and criteria for the physical structure and additionally the ratio of child to teacher. (The latter part of this is not a full sentence and I have tried to make sense of it by linking it to the previous one, but I am not happy about it. I would like you to look at it carefully.

*"For a day care to qualify we must not have crowded children...They said children should not be overcrowded and that we should send teachers to school. Have not more than 60 children in my centre. Our centres are not the same and the space is the same for our back yard day care centres. They told me that you must have space for children to play...And the car must get into your yard and also go out. The car must come in and go out the car must come in freely...It must be not congested so they came to my place and value my place to make sure that I qualify for that."*

Overcrowding reduces the effectiveness of the care and programmes provided in ECD centres and also places strain on caregivers (Barker & Misselhorn, 2014). The rights-based approach seeks to safeguard the human rights of the service users (Patel, 2005). The fact that the number of children enrolled in ECD centres is checked against the capacity of the centre indicates a care towards the rights to safety. The services provided by ECD centres should be able to provide the children with a safe environment at the centre. The bill of rights points out that everyone has the right to a safe environment, and every child has the right to education.

#### **4.2.6. Theme 5: Stakeholder Role and Support**

Stakeholder in this regard refers to the community where the ECDs are located in the CoT. The list is not exhaustive as it further includes DoE, DoSD, SAPS, individual funders and sponsors. The spheres of government that enforce applicable legislation are also considered stakeholders. Lastly it involves and includes the parents of the children and or guardians.

##### **4.2.6.1. Sub Theme 5.1. Stakeholder Engagement**

Some of the ECD centres which had trouble complying with the requirements for funding highlighted how some of their community members played a crucial role in assisting them comply. Community members were, thus, able to identify some of the things that the ECD centres needed and they provided these despite their lack of knowledge about things needed in ECD centres. The responses below, thus, bring to light the importance of community involvement in the running of ECD centres and how it is able to assist wherever possible.

*“I was helped by my committee members they know nothing I think they know the word equipment the educational equipment. They just looked at the classroom for the kids and they say this classroom needs tablets and chairs and toys. For them to eat you see.”*

*“Uhhh, to tell the honest fact neh, as I’ve said I was, I was not well, so I was helped by community members’ neh and then they knew nothing about this crèche thing. What they did, I think they didn’t understand the words ‘educational equipment’...You see? So when they looked at each classroom, they said these classrooms need this, and this, and this...This room might need this and chairs and tables, things like that plates for them to eat, yah things like that”.*

The value of having different role players playing a significant role in the provision of ECD services is well recognized. Researchers have documented that an investment in early childhood development requires a range of actors who collaborate and cooperate to provide holistic services to children and ensure their rights to protection, participation,

development and survival (Committee on the Rights of the Child, 2005:4). According to Soto and Rey (2005:103), the government must share responsibility with families and communities to improve the nutrition, health, psychosocial development and living conditions of children and their families.

### ***Collaborative efforts amongst stakeholders***

One of the recommendations from the participants was that there is a need for social workers and the principals of the ECD centres to work together and respect one another. One of the issues highlighted in the statement below is the need for proper communication on the part of the social workers and to act professionally towards the ECD principals despite possibly the different levels of education.

*“When they come they must make an appointment and tell me that Mam T. you must prepare this and that and then we will see you have done it right next time to the next one until you benefit from them. You must learn something from them and work together. That will help us a great deal if they work hand in hand with us not harassing us. Yes, I was afraid of them but now I am not afraid...I talk for myself. When you go up I also go up and when you put your hand on the table I also do that...What about the poor old ladies that have not gone to school?...I mean I did not go to school but you can understand me when I am talking to you...There are some that do not know English and they need somebody that will help them...Because I was working and I left my work because I was tired of working Saturdays and Sundays.*

*One day I was watching the television and president Zuma said you must not wait for the government to come and create jobs for you...You must create jobs for you...I stood up and I said to my husband this is right I am going something about the rooms that are empty in my house my rooms were empty. We used them as a store room. So I said I am going to use those rooms to create jobs two or three people will have money...They can take care of their families and I stood up and did that...Then I was expecting people to guide me...They should be professional*

*and talk to us and if we do not do the right thing you must tell and show me...If you teach your teachers to do something you be an exemplary. You tell them this cell phone works like this you press here and there and blah!!! Blah!!! Next time you do a follow up and remember what you did last time and you do even if she does not do it right you give her a chance until she did it right by the time you receive R100,000 if they did follow up if they did follow up our day care centres will be nice.”.*

This finding challenges social workers in the ECD field to play an *enabler role*. This role involves increasing the service user's personal and social power so that he/she is empowered to take action to improve his/her life (Patel, 2005:219). In addition, social workers are being called upon to play the *networker role*, which involves linking service users with resources and mobilising partnerships to achieve mutual benefits (Midgley, 2010:19). According to Soto and Rey (2000:117), for ECD services to be efficient and effective there is a need to establish a criterion for the shared participation and co-responsibility of families, society, and government for children's growth and development, especially that of young children.

At times, however, the researcher observed that in the context of politics municipalities can easily interfere with the role of a social worker which makes it very difficult for social workers to give effective services to the ECDs. A typical example was indicated in chapter one as follows.

The Department of Social Development within the CoT normally conducts meetings with the social workers that are involved in planning. Just after planning, the granting aid would be advertised in the community Imbizos all over the city. Then the candidates are recruited. The criteria of recruitment involve councillors in order to make sure that all wards are included in the process. Some ECDs get motivation letters from their respective councillors to be included based on their backgrounds. This process becomes very frustrating to the social workers involved owing to political interference where some ECDs are included even when they do not meet the funding criteria. This process

sometimes involves corruption where ECD centres would bribe ward councillors to motivate their inclusion.

#### **4.2.7. Theme 6: Role and conduct of social workers in ECD Centres**

Participants were asked specifically what human resource challenges the participants met in complying with the requirements of the City of Tshwane's funding requirements. The human resources referred to the social workers with whom the principals interacted, and these are discussed below.

##### **4.2.7.1. Sub theme 6.1 Making unrealistic demands**

The demands of the social workers were in some instances considered unrealistic, and some ECDs were threatened that they would be closed down. One participant argued that they had demanded a sick bay room and an office at their centre of which they do not have funds.

*“The social workers wanted more things that we can't do even the backyard. They want us to make our crèche like the high standard and they threatened us when we can't do those things and they say that they will close our crèche.”*

*“Social workers want things that are out of our reach that are hard to do in the backyard, they want us to make our crèche be one of a higher standard, and threaten us that if this is not possible, we will lose our crèche.”*

*“Yah my challenges on that was they used to come neh, to the centre and then they used to tell me, you are short of this and that, make sure you get this and that and that for example make an office, make a sick bay. Those things they need money...Out of sixteen kids, out of four staff members...Where will I get the money to build my office? Where will I get the money to buy that bed for sick bay?...Even that room to make the sick bay...So those are the things...they were big, big challenges. Even the toilets, even on the toilets even now, because on toilets they say we must have 20 kids for one toilet, and on those toilets you must*

*make a bigger one, for the wheelchair to go inside...You see? And then for that seat for a wheelchair person, where will I get that money?"*

*"My challenges on that they used to come to the centre they will tell me get this and that for an example make an office make a sick bay...where will I get the money to build the office and where will I get the money for sick bay...Those are my big challenges even the toilets they are still a problem even now. They said we must have twenty kids for one toilet and also make a bigger one to make the wheelchair to go inside...You see where will I get that money?"* These seem to be very repetitive.

This challenge shows how the current ECD framework is biased towards the norms and standards of formal ECDs that require high capacity levels and household affordability skills, funding and many other resources (Barker & Misselhorn, 2014) not taking into account the challenges faced by ECDs in underserved communities and informal settlements. The social workers come with their demands but they do not offer any programme of support or intervention to ensure that there is any improvement in these ECD centres.

#### **4.2.7.2. Sub theme 6.2 Human Resource Challenge**

In 2008, the Department of Labour confirmed that social work was a scarce skill, and listed it accordingly, in the sector skills plan of the Health and Welfare Seta (Earle, 2008). In addition, the Occupation Specific Dispensation (OSD) was implemented with the clear objective of addressing the brain drain and mass exodus in social work (Earle, 2008:8). South African social workers also face human resource challenges in the implementation of the Children's Act, stemming from the staff shortages, inadequate training and high caseloads (Alpaslan & Schenck, 2012, pp. 374-376). Earle (2008, p. 9) states that owing to resource constraints, social workers, because of the high workloads, low salaries and poor working conditions, are leaving the profession, or the country, to work abroad.

The resignation of social workers also burdens the struggle of the shortage of human resource. In one incident, a participant mentioned a challenge of the social worker resigning and leaving her in the lurch when she was supposed to have helped her write her report. In such instances, then, social workers are not reliable.

*“The worst part of it I submitted the forms and when we went to the workshops of the training courses there was a social worker who used to work with us. They use to take the receipts I gave it to them so that they said at the end of the term we must sit down and write a report. A report of what I did with the money and I explain this and that to the lady and I gave the lady everything. That lady was a social worker...And when time comes that I should write a receipt they look for them in their car boots and they were nowhere to be found. When I started to go to them and say listen I need to submit my report and I complied with your instructions...I asked the lady who took our receipts and all that. I was told that the lady has resigned...I could not submit my yearly reports because all my receipts went with her...She took my things...Yes my papers...Yes mishandling of my papers. At the end the social worker of the City of Tshwane helped me to a report. Then it was fine I do not know where they got the receipts and the information but finally the report was written. Because the day I took there I went there they said I should read there and I wrote the statement. I read it and it was fine I signed and gave it to them. They took it to the City of Tshwane.”*

In the literature this finding is confirmed by Viviers, Biertsteker and Moruane, (2013), who analysed resource issues related to the provision of ECD services in South Africa and came to a conclusion that limited human resources for providing quality early childhood development services, the absence of an integrated human resource policy and strategy across all sectors and insufficient service infrastructure to support different ECD services are some of the reasons for South Africa's failure to meet the needs of its young children efficiently and effectively.



#### 4.2.7.3. Sub theme 6.3 Unprofessional conduct

Some participants felt strongly about the social workers not acting in a professional manner and that in most cases the young Social Work graduates tend to be disrespectful to the ECD principals.

*“They could not talk to us properly. When they come here to come and check my teachers would even say what is happening and I said these people when they come they expect us to run up and down they are looking for registers and they are looking for that. They do not tell you that they come they just pop in anytime. When you start to question them they tell you that you are stubborn.”*

*These girls who have graduated they do not respect us they harass us...When we were talking as a forum we wanted to report these people because they harass us. It is only that the R100 000 we did not get it at the same time this year was that group and this year was that group...At the end we thought that we need to sit down and report them and also tell their bosses that they are harassing us...they were not professional.”*

*“They only came here because they do not know what they want and what they are going to do. We are always shivering that when they come here and when they are going to come. When they come they must make an appointment and tell me that ma’am you must prepare this and that and then we will see you have done it right next time to the next one until you benefit from them. You must learn something from them and work together. That will help us a great deal if they work hand in hand with us not harassing us...Harassments is bad”.*

The social workers in the ECD field are being called upon to implement services from a human rights based approach. This approach addresses the equitable shift of power relationships as well as the empowerment of individuals (Androff, 2016:26).

## **4.8 THEME 7: RECOMMENDATIONS ABOUT THE ROLE OF SOCIAL WORKERS**

### **4.2.7.4. Sub Theme 7.1 Assessment and identification of real ECD centre needs**

The majority response focused on the suggestion that the centres should be asked what the centre needed in order for the funding strategy to be effective. This was seen as a very important suggestion.

*“When they give us all the money we could have made our crèche to run smoothly...Our crèche now is too little. The health certificate says we must have 35 children. When I get the money I come to renovate my crèche to be big. Get more children to operate my crèche...They must find out from us on what we want to do...That person must ask us. Ask the principal on what we need in our crèche. They give us money and they give us Instructions on what we should do with the money...I have already have the other ones.”*

*“They need to be specific to the needs of every crèche, and find out from us and ask every individual principal, the exact needs per crèche...Because they give us money and give instructions that are not relevant to our crèche as we already have some things...Just for them to come into the crèche and inspect our exact needs they have to fund, from the education of the teachers to the workshops they receive.”*

*“Okay, I think social workers, or Tshwane must send social workers to us, they must sit down with us and ask us what do we need...Then we write those things down, they must even check whatever we need. They must write them then we must also write them...So that even next time when we get the funding...We do what is right for us.”*

*“I do think if they have given us the R100 000 and then we write the quotations for ourselves for the things that we need and then after that we compile the receipts and then show them what we did about it. We are still struggling.”*

Proper needs assessment of the ECDs will allow for funding to be more specific to the needs of each and every ECD. This, therefore, means that the funding process of the CoT must be a consultative process which uses participatory decision making in order to be able to achieve the intended outcomes of the funds.

### ***Consultative process and training***

One of the requirements of a consultative process is adequate communication between the funder and those intended to benefit. As such the participants postulated that there is a need for the CoT to sit down with them and have a discussion on the funding, and provide necessary guidance and support.

*“They must call a meeting and we must sit down. They must be called and tell them what they did because everybody remembers what happened during that period.”*

The principals wanted the City of Tshwane to visit centres personally and provide support and coaching.

*“To come to our crèche and inspect that money we use very well like education of our teachers to expect to get all the things that they want.”*

*“The support that we need from them is that they must pay just once a month visit not to come and check if you are doing the right thing...Yes if you are doing the right thing and if you don't they have to help me. They need to help us by telling us that you did this, but you were supposed to do it like this and then this will be right. They must tell us time and again and they must not wait until their boss says something.”*

*“Most of the people that opened day care centres that time is old people it is really not young people like now...We need 100% support...Yes coaching that will help improve our communication with them the communication is bad because when*

*they come here they harass us and off they go. Next time they come with their books and say where is the principal? I want to see how many children you have and where are the teachers and where are this and that? After they finish they go and don't even ask you if are you happy and is there anything we can do for you? You can't give me money every day you must find out if I am progressing."*

There was also the suggestion that the City of Tshwane should hold more workshops with the principals to empower them, and, particularly, for the teachers at their centres.

*"Yes and also need to workshop the teachers of us...Will help the teacher and the teacher will get more experience...They can't go back to their places and open their own crèches they should be more education and workshops."*

Another participant supported the suggestion that there should be workshops for teachers:

*"(Workshops) will help with the experience of the teachers...And this contributes to what they can't find anywhere else, which is the same education."*

The participants of ECD centres were asked what helped them to comply with the City of Tshwane's funding requirements. Some participants said that all they did was follow the instructions given to them by the social workers and this helped them to comply.

*"Yes I used it the way they wanted otherwise they will come and shout you and tell you that this was not supposed to be done. We must use it like this. I had to follow the way they want and follow their instructions...Yes, it help me to comply..."* She added: *"Yes I did whatever they wanted. I used to comply and supported that with the receipts."*

*"It was not difficult to comply. They told us they have given us the rules so that we must not break them. Food we must buy so and toys we must buy so much. You must not pay the teachers and you must not buy 1, 2 and 3 with the money. So we were always careful not to always careful not to break the law...Yes the rules."*

#### 4.2.7.5. Sub Theme 7.2 Provide Guidance and Support

The participants felt that they must be supported more especially by social workers to attain all that they need to comply with the requirements of funding from CoT. They felt that it is unfair for the social workers to tell them only what they needed to change or do without taking into account the cost implications of some of these requirements. The participants perceive that the social workers have a superficial understanding of the challenges they face, and so if they come and engage with the centres and get a better understanding of the challenges they face, it may be that they would be in a position to offer the necessary support and guidance.

*“The social worker they can assist us you know like what we have some let’s say the children to wash their hands we need basins to wash their hands. Something that is plastic they hang the so that the water comes out, they must assist us and get those things for us...Yes, the sanitary kind of things they must introduce them to us.”*

*“You know what? Ehhh as I was saying something about constant use right now...social workers, I don’t know if when they sit down and make papers there that we must comply to them, do they know how much these things cost? Why I say this in the first place neh, they’ll say they want a health certificate, to make a health certificate neh, you must go to the inspector’s office, then the inspectors must come to your place, you fill the form, and then they I was having, I think it was 22, before I got the health certificate, they told me that my place only accommodates 16 kids, If I must get the health certificate, you see? Then I was asking myself for 16 kids, 2 teachers, cooker, garden boy, myself again, with 16 kids, just imagine, and then the inspector comes and tells you. This window come and check the place, then after they’ll tell you remove this door, not knowing how much you are earning, or how much you are doing in your crèche, “Remove this door and then put it that side”, and then, “These kids they are many, please make*

*another room”, You see is not right, move it there, this thing is not right, do it like this...You see? So it’s difficult...I think if they can come to maybe our crèches/ centres and see and hear maybe our problems”.*

One of the participants felt aggrieved that there was no follow up by City of Tshwane and consistency was lacking. She suggested that follow up was essential in order to support ECD centres.

*“They were not prepared to talk about what they come to check, what they wanted to check and go they don’t even ask you if you were happy. Did you enjoy the R100 000 or whatever they do not ask about that. We gave them papers and that was an amen...They select another group. They never do follow up to see if did this money helped the day care centre...and what are the challenges. Where you happy did you benefited and blah!!! All these and they (don’t) asks us all those things...The support that we need from them is that they must pay just once a month visit not to come and check if you are doing the right thing...”*

These findings are on a par with what is stated in the literature regarding the role of social workers who are operating from a developmental approach. They are asked to play an educator role, this role involves various educational roles that include mentoring, coaching and skills training to service users and empowering them on how to access resources (Patel, 2005:219).

#### **4.2.7.6. Sub theme 7.3 A hands on approach**

Some participants raised the matter of their frustration concerning the role of social workers. They recommended that social workers should be the direct line of communication rather than being a middle man. In other words, social workers should be equipped to be able to answer questions correctly and appropriately.

*“I would say on my side I would say they must not include the middle man, the middle man would say I do not have that access...It is better for you to say I have*

*1, 2, 3 I have said that more than once like write a letter and wait it is better for us to work directly with the City of Tshwane than the middle man...she or he would tell you that I do not have much clue. I do not know if they workshop them (the social workers) or do they give them more information about us or what...Maybe their information it was so limited...Because some of the things that I can say those social workers are still new. I am not sure if they were straight from school because they will tell that this one started two months ago.”*

The finding is indeed within the scope and role of social worker. Participants desired social workers to play both a broker and a networker role and this is not new in social work literature. The broker role includes linking service users with physical, financial, educational, technical and environmental resources in order for them to meet their needs (Patel, 2005:220). The networker role involves linking service users with resources and mobilising partnerships to achieve mutual benefits (Midgley, 2010:19).

#### **4.2.7.7. Sub theme 7.4 Help with families**

Another participant recommended that the social workers could do more than simply checking ECDs by providing assistance to the families of the children who attended the ECD centres.

*“Here in there some do not hear and some can’t see and others their mothers are suffering and others they do not have parents...That is where the social workers they can get in...They should visit our centres and ask us what our difficulties is...What do we came across...As teachers, care givers and principals in our centres because we encounter difficulties but we can’t solve them...We do not know where to go.”*

#### **4.2.7.8. Sub theme 7.5 Understand backyard centres**

With regards to the unrealistic demands of social workers, some of the participants suggested that social workers should demonstrate an understanding of ECD centres

which are operating from the backyards. This also links to the sub-theme in which principals stated that impossible demands are made of them.

*“The City of Tshwane must clarify our backyard day care centres they must not compare us with the developed ones and us because we can’t comply with all the things that they want from us because we are limited...Our spaces are limited and everything that we have is limited...We can’t. Those laws that are written down they must sit down and consider them. We in backyard they must write our own criteria...They must not compare us because they are discouraging us yet we are looking after children. Those ones they benefit a lot better than us...They tell us you can’t get this if you don’t bring this yet and we have a small space and they tell us that they are going to close your centres if we do not comply...How can I comply in this space?...Then we become discouraged they do not encourage us to go forward...Yes it is touchy too much. They really do not take into consideration...They do not consider the fact that we look after children...They came here and when they go out they leave you hurt because they just destroy you telling you that you must bring this and you do have this. All those things they want money. Money is needed to get those things...We are working with mothers that receive grants. This month they pay and next month they came and tell you stories...The government does not take care of us, they really do not care about us. The social worker they can assist us you know like what we have some let’s say the children to wash their hands we need basins to wash their hands. Something that is plastic they hang the so that the water comes out, they must assist us and get those things for us.”*

This lack of understanding of the environment in which ECD centres in poor communities operate was found in the diagnostic review issued by the National Planning Commission in the Presidency, which established that, despite the policy commitment to early childhood development, implementation in the poorest communities lags behind, and this is visible in the country’s development indicators on children (RSA, 2011:14). The



National Development Plan regrettably indicates that ECD programmes do not serve South African children as they are intended to (RSA, 2011:269).

According to Patel (2005:66), the present social services in South Africa cannot be discussed without referring to the country's historical background. Before 1994, the South African social welfare system used both the residual and institutional approaches to welfare service delivery, both of which were anchored on "colonialism, discrimination and apartheid" (Lombard and Kleijn, 2006:229).

#### **4.3. CHAPTER SUMMARY**

The chapter has presented the biographic details of participants in a narrative formant, and, where applicable, followed by a graphical illustration of the findings. The findings from semi-structured interviews were discussed by means of themes and sub-themes, which were also presented in a hierarchical tree diagram. The discussion and analysis of data have been supplemented by the voices of the participants by means of direct quotations. Moreover, the verification of findings with the literature has been done in the relevant sections. This chapter additionally assisted in outlining the possible ways forward for ECDs and particular ways for ECDs to receive funding. Chapter five will focus on conclusions derived from the key findings, and the researcher will make recommendations based on the study.

## **CHAPTER 5 SUMMARY, CONCLUSIONS AND RECOMMENDATIONS**

### **5.1 INTRODUCTION**

The aim of this research study has been to develop an in-depth understanding of the status of compliance by Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy. This chapter gives a brief outline of the previous chapters, the qualitative research process followed and provides conclusions and recommendations based on the qualitative research process and the findings.

### **5.2 SUMMARY OF THE PREVIOUS CHAPTERS**

**Chapter one** presented an introduction and orientation to the research study. The first section of the chapter described the background and rationale for the study. It also outlined the theoretical framework which informed the study. The research question, goal and objectives aligned to the research topic which guided this study were detailed in this chapter. The research methodology was introduced briefly, including the ethical considerations that informed the study.

**Chapter Two** outlined the historical background of early childhood development. This background covered the legislative and legal framework including funding model requirements for compliance purposes. The literature looked at the different role players in ECD programmes. The chapter further looked at the role-players and their role in ensuring compliance measures are in place. Finally, the theoretical perspectives in supporting sustainable ECD programmes were unpacked.

**Chapter Three** provided a detailed account of the qualitative research methodology introduced in chapter 1. It further gave a detailed account of how method was applied in order to achieve the objectives of the study. This chapter was, therefore, a description of the qualitative research processes applied in order to understand the compliance of Mamelodi ECD centres with the CoT ECD Funding Strategy. The chapter focused on the research methodology, research approach, research design, population and sampling,

preparing participants for data collection, method of data collection, pilot testing, data analysis and data verification.

**Chapter Four** presented the findings of the study. Firstly, the chapter outlined the participants' biographical information. It then have the findings from the semi-structured interviews presented in the form of themes and sub-themes that emerged during data analysis. The discussion of data was supported by direct quotations from the participants and references to literature. The presented data was from interviews conducted with eight principals from ECD centres operational in Mamelodi.

**Chapter Five** gives a summary of the first four chapters of the research report. The summary of the study and conclusions reached based on the qualitative research process are given and discussed. The recommendations the researcher proposes based on the study findings are also presented.

### **5.3. SUMMARIES, CONCLUSIONS AND RECOMMENDATIONS OF THE RESEARCH STUDY**

This section is a summary of the qualitative research process and the major study findings which include the conclusions reached and recommendations for practice, policy and future research.

#### **5.3.1. Summary and conclusion of the research process**

In order to explore the status of compliance with the funding strategy of the CoT by ECD Centres the researcher employed a qualitative research approach. Explorative, descriptive and contextual research designs were used for the study. Using these designs made it possible for the researcher to gather rich data on the compliance of Mamelodi ECD centres with the CoT ECD Funding Strategy.

**The research question, which informed the study, was:**

- What is the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy?

**The goal of the study was:**

To develop an in-depth understanding of the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy.

**The objectives of the study were:**

- To explore the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs; and
- To describe the findings regarding the status of compliance to the CoT ECD funding strategy by the Mamelodi ECDs.

The above research goal was divided into the following **task objectives**:

- To obtain a sample consisting of principals of ECD centres in Mamelodi that had received funding from the City of Tshwane (CoT) during the past seven years;
- To conduct semi-structured interviews facilitated by open-ended questions contained in an interview-guide with participants to collect data about the status of compliance with the CoT ECD funding strategy by the Mamelodi ECDs;
- To transcribe, sift, sort and analyse the data collected, utilising Tesch's eight steps for qualitative data analysis as mentioned in Creswell (2013);
- To interpret the data and conduct a literature control to support /confirm and/or contrast the themes and the storylines of the research findings; and
- To draw conclusions and make recommendations regarding the status of compliance with the CoT ECD funding strategy by ECD centres in Mamelodi

Using the task objectives the researcher was able to follow a well-structured process to achieve the set goal successfully.

As the researcher wanted to develop an in-depth understanding of the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy a qualitative study was conducted. The data was collected from eight participants using semi-structured interviews. The eight steps proposed by Tesch (in Creswell, 2009:186) were used to analyse the data. The qualitative research methodology enabled the researcher to be able to gather in-depth data from the participants. This was in line with

the goal of the study which was to develop an in-depth understanding of the status of compliance of Mamelodi ECD Centres with the City of Tshwane ECD Funding Strategy.

### **5.3.2. Conclusion relating to the qualitative research process**

The conclusions listed below were reached from the qualitative process employed in the study:

- The purposive sampling methods used to select the study participants made it possible to attain rich information from the participants.
- By preparing the participants for data collection the researcher was able to form a trustworthy relationship with the participants. As a result, the participants were not only able to make time to be interviewed but were comfortable expressing their views to the researcher.
- The semi-structured interviews worked as a guide for the researcher whilst allowing for probing in order to explore the phenomenon under study.
- The themes which emerged during data analysis give a varied description of the experiences and perceptions of the participants with regards to the funding strategy of the City of Tshwane. The trustworthiness of the study findings is demonstrated through the data verification process.
- Ethical considerations guided the researcher's conduct and engagement with the study participants,

It is, however, important to note that this study was qualitative in nature and limited to a specific geographical area. As a result the study findings cannot be generalised to other settings or the whole population.

### **5.3.3. Summary and conclusions based on the research findings**

This section details a summary of the six themes and 15 sub-themes which emerged from the qualitative analysis of data as well as the researchers conclusions.

#### **5.3.3.1. Theme 1: Participants' understanding and experience of the CoT ECD Funding Strategy**

There was a lack of a clear understanding of the CoT funding strategy by the participants. Findings from the study indicate that the participants did not receive adequate explanation about how CoT funding works, how it is allocated and why this is done. As a result a majority of the participants were disaffected primarily because the allocated funds were not flexible but specific with regards to how they were to be used, and they could not, thus, be used to address all the needs the ECDs could have had.

A bulk of the funds were directed towards training, because the CoT's aim was not only to improve services at the various centres but to also equip the teachers with the relevant and necessary skills. The participants, however, stipulated that the teachers were already equipped and did not need more training.

If training is to be a mandate for the ECDs, there needs to be an assessment of the training needs of the centres so as to avoid duplication and repetition. This is to avoid situations where the participants do not benefit as intended. These findings highlight poor communication between the city and the intended fund beneficiaries. Instead of using a participatory approach, the City of Tshwane seems to have adopted an authoritarian rule, where they tell the beneficiaries what to do and what not to do. Despite this negative feedback on how funding was introduced to the participants, some argued that it had been beneficial as they had been able to offer better services to the children and also attend to some of the needs the ECDs had.

The study, therefore, shows that to a great extent the city of Tshwane, just like many other funders, has its own agenda. This means that it has its own opinions on the needs, and problems it deems important and in need of funding.

### **5.3.3.2. Theme 2: ECD Centre needs and CoT Funding Strategy requirements**

The funding allocated by the CoT did not meet the needs of many ECD centres. The funding is allocated for specific purposes and, therefore, the participants cannot divert the money in order to address some of the needs they may have as a centre. This highlights the poor understanding of the City of Tshwane funding strategy and the need for beneficiaries to be educated on how the funding works. The study shows that many ECD centres had needed funding to renovate their premises in order to improve the environment for the children, but the funds allocated were not for that purpose and, thus, this could not be achieved. The expectation of the participants was for the funds to be more flexible so making it possible for the ECD centres to use them according to their specific needs. The study also brings to light the fact that the needs of ECD centres are not standard to all centres. As a result there is a need for a proper and comprehensive needs assessment of each ECD centre before funds are allocated in order to determine what the money is urgently needed for.

Some of the misconceptions about the CoT funding emanated from the fact that the participants thought the money allocated was for all the items they had listed in their applications. The study highlights the need for collaborative work between the City of Tshwane and other stakeholders who provide funding and donations to the ECD centres. This is because, in some ECD centres, the participants highlighted that they did not need funds for food from the City of Tshwane as they received food donations from various stakeholders, such as Woolworths, Pick n Pay and Checkers.

There is a shortage of donor resources worldwide and it is the case in South Africa as well. The ECD centres find that the funds from the City Of Tshwane are inadequate not only to meet their needs let alone for them to expand their services. As a result, ECD centres may be forced to allow the City of Tshwane and any other donor they may come across to dictate how funds ought to be used rather than their not receiving funds at all. The issue of fund restrictions is not unique to these EDC centres and the city of Tshwane. The challenge with many donations and grants is that they usually carry

restrictions about how they may be used, which is usually to cover direct programme costs and not any overhead costs which an organizations incurs.

#### **5.3.3.3. Theme 3: Relationship between the ECD's and CoT**

There is a poor relationship between the participants and the CoT. The relationship is characterised by a top down approach, with an undemocratic process with regards to fund management. The principles of the ECD policy require that service providers have autonomy over how they use funds. Unfortunately the CoT funding strategy is characterised by poor beneficiary participation in decision making. The participants felt that they should have been involved in making key decisions which affect their ECD centres.

Another factor which highlights the poor relationship between the participants and the CoT is the fact that the participants were given only a short period of time to apply for funding. As a result the participants did not have enough time to comprehend fully what was expected of them and the requirements of the CoT about how funds were to be used, and they could not ask for clarity or express their misgivings. However, it is also noted that not all participants complained about short period of time. It was indicated that there was also political interference during recruitment stage. Ward councillors would take bribes from some ECD centres and force social workers to include those ECD centres even though they were not part of preparation meetings.

Some participants noted that they were called for a preparatory meeting even though a number of these participants displayed a lack of understanding of the requirements. This could point out that there was no proper method used to orientate the participants to the funding processes and, despite their misgivings, they were forced to comply because they were desperate for the funds. The relationship between the City of Tshwane and the ECD centres, like many funder-beneficiary relationships, is characterised by an imbalance of power and inequality with one having more control than the other.



#### **5.3.3.4. Theme 4: How ECD centres used the allocated funds**

The participants used the funds according to the CoT stipulations. Of the amount allocated by the city of Tshwane, R40 000 was meant for training, and that is what the ECD centres used it for. The lack of participatory decision making resulted in the failure of the CoT to identify the training needs of the ECD centres, but instead the centres had to pay R40000 to an external service provider who covered some aspects in which the participants had already been trained.

Some participants used the funds to buy food for the children whilst others stated that they had not been allocated the money to use on food. The participants argued that they received food donations from other stakeholders and, thus, the money allocated by the CoT was more than enough for food and they would, thus, have liked to use it to address their other needs.

It is most common that most funders avoid investing in overhead expenses of beneficiary organisations which are likely to improve the organisation's infrastructure and management, and unfortunately the beneficiaries accept this. Most of the ECD centres needed funds to renovate their physical structures, because, as they stand, their centres are too small and do not comply with the DSD requirements of an ECD centre and, on the other hand, they do not meet the requirements and are often threatened that if they fail to comply they will be closed down.

#### **5.3.3.5. Theme 5: Support team and stakeholder role**

The ECD centres mentioned receiving support from some of their community members, especially with regards to the ECD's being able to comply in order to receive funding.

The relationship between the social workers and the ECD centres was occasionally described as being antagonistic and, as such, the participants suggested that these stakeholders needed to find common ground in order to be able to work together respectfully. Social workers need to offer support to the ECD centres as they need it. The involvement of parents and the community at large is very important in early childhood

education because it does not only create a trusting relationship between the ECD centre and the parents, but it also creates a safe space for the children.

#### **5.3.3.6. Theme 6: Challenges in engaging with social workers**

The participants and the social workers did not have a good relationship. One of the challenges is that participants felt that the social workers make unrealistic demands on them and sometimes they receive threats that their centres will be closed down. Some of the ECD centres in this study are located in underserved and informal communities. As a result they have their own challenges which make it difficult for them to comply with the set ECD standards which are biased towards the norms and standards of formal ECDs which require high capacity levels of household affordability skills, funding and many other resources. Instead of making demands, social workers should be a support system, and offer interventions and programmes which will help the ECD centres improve their services. Social workers should be advocates for leading and developing high quality ECD programmes.

#### **5.3.3.7. Theme 7: Participant recommendations on the role of social workers**

- The participants asked for better communication between the ECD centres and the social workers. In order for the funding strategy to be effective, the real needs of the participants should be identified, as funding would then be tailor-made for the centre's specific needs.
- Better communication can be achieved through a consultative process between the funder and the beneficiaries. The City of Tshwane needs to visit the centres and hold workshops with the principals to provide support and coaching where needed. The participants perceive that the City of Tshwane and the social workers have a superficial understanding of the challenges they face, and so, if they came and engaged with the centres, so having a better understanding of the challenges they face, they may be in a position to offer the necessary support and guidance.

- Participants want social workers to be able to answer all the queries and questions they may have instead of being the 'middle men'.
- The social workers should be able to link the ECD centres with physical, financial, educational, technical and environmental resources in order for them to meet their needs, whilst also mobilising partnerships.
- There is a lack of understanding of the environment in which ECD centres in poor communities operate, and so there are unrealistic demands made on ECD centres.

#### **5.3.3.8. Recommendations based on the research study**

Based on the research findings and research process, the researcher makes the following recommendations for practice, research and policy.

#### **5.3.3.9. Recommendations for practice**

- ECD programmes are a core of human development that determines academic success and economic productivity. It is, therefore, crucial that social workers should be engines in managing such programmes. Surprisingly, in this study there are no social workers in the management team. Social workers are involved only in the implementation of the strategy. In most cases they are limited to answering critical questions from the ECD principals which leaves the principals more frustrated and still facing difficulties to comply.
- Training and equipping social workers to be able to offer guidance, assistance, link ECD centres with opportunities which can improve their situations is needed whilst ensuring quality programmes are being offered.
- Social workers should also be trained in the monitoring and evaluation of ECD based programmes in order to give proper advice to the centres.
- The City of Tshwane needs to adopt a participatory approach with regards to the allocation of funding and engagement with the ECD centres. This is bound to improve their relationship and also ensure that the voices of the ECD centres are heard.

It is important for the City of Tshwane to perform ECD needs' assessments during recruitment before allocating any funds to the ECD centres as they have varied challenges.

- A majority of the ECD centres are located in poor and informal settlements. The focus should not necessarily be on the physical structure of the ECD centre but rather on the quality of the services being rendered. Individual centres will reflect the community they are located in and thus cannot be anything other than provide the requisite curriculum despite the structure.
  - The system: adult child ratios, quality of training rendered to teachers, adequate and suitable play material.
  - The programme: the quality of the child/adult interaction, a structured routine to include playtime, physical activities, etc.

#### **5.3.3.10. Recommendations for policy**

There are set guidelines, norms and standards which guide one's decision to be involved in the ECD sector. These are informed by the Education White paper 5 on Early Childhood Development, the 1997 White Paper on Welfare, the Children's Act (No. 38) 2005, the National Integrated Plan for Early Childhood Development, and the Guidelines for Early Childhood Development Services of the national Department of Social Development. In the light of the findings from the study, the researcher recommends that:

- It was also noted that there is a big gap between crèches that are operating in back yards and informal settlements compared to those in formal settings. This calls for a new perspective of looking at how to structure the requirements of ECD funding for the ECDs that are operating in an informal settlement. Blanket approach funding policies are likely to compromise the quality of education of the ECD's in informal settings.
- The CoT needs to adopt funding strategies which accommodate informal ECDs and home-based ECDs instead of merely tolerating them so as to help to ensure quality.

The South African Constitution and law advocate the interests of children to be of great importance in all matters concerning them. As a result, children who attend informal ECDs and other home-based centres ought not to be discriminated against and ought to benefit from all funding, just like other centres.

Home-based ECDs and informal settlement ECDs are the only way the poor can help their children access learning and developmental opportunities, and, therefore, discrimination against these centres is a step back in addressing the inequalities which exist in the country.

It should also be stated that, if these considerations are not prioritised, it could compromise the future of many children residing in informal settlements as most of South African children form a big part of such structures.

#### **5.3.3.11. Recommendations for further research**

As this study sample focused on the City of Tshwane and, more specifically, Mamelodi township, further research should be conducted to include other municipalities within the Gauteng province. That could bring about new insights into the phenomena of home base ECD crèches when it comes to the requirements of funding.

Future research should also focus on assessing whether the political management and the social workers from the City of Tshwane have a clear understanding of the role of social work in matters of ECD funding.

#### **5.4. CHAPTER SUMMARY**

To conclude, the study started with an overview of the research, which included an introduction, problem statement, rationale of the study and a theoretical framework. This was followed by the methodology section, which detailed the data collection process and a literature review on Early Childhood Development in South Africa. Data analysis was conducted, emerging themes and subthemes were generated. This chapter is a

conclusion to the study, outlining the findings, based on the themes and subthemes, as well as recommendations based on the study findings.

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## **7. APPENDICES**

### **7.1. Addendum A: Letter Requesting Participant's Participation in the Research Project**

Department of Social Work

University of South Africa

06/01/2017

Dear potential research participant

**RESEARCH PROJECT ON STATUS OF COMPLIANCE OF MAMELODI ECD CENTRES TO THE CITY OF TSHWANE ECD FUNDING STRATEGY: A SOCIAL WORK PERSPECTIVE**

My name is Nomaefese Gatsheni, and I am Master of Social Work student of the Department of Social Work, University of South Africa (UNISA). As part of my studies I have to undertake a research project. My research project entails conducting an investigation of the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, City of Tshwane. The rationale for this study is that no study has been done on the topic, in a bid to propose recommendations to review the existing policies on the CoT ECD funding. Since you have personal experience about this subject, I humbly request your participation in this study. Should you agree to this request, I would like to have a face to face interview with you, at a time, date and place convenient to you. The interview will not take longer than 90 minutes. If necessary, arrangements will be made with you for follow-up interviews. During the interview(s) you will be asked the following questions:

- Tell me about your experiences related to the CoT ECD Funding Strategy
- What is your understanding of the purpose of the CoT ECD funding strategy and the funding requirements?

- What were some of the needs that you identified and included in your application for funds?
- What compliance issues did social workers share with you as basis for the funding of your ECD centre?
- Tell me more about how you utilized the funds that you received from CoT to benefit your centre?
- What helped you to comply with the CoT ECD funding requirements?
- What made it difficult for you to comply with the CoT ECD funding requirements?
- What human resource challenges did you encounter in complying with the CoT ECD funding strategy and requirements?
- What in your view can be done to address the challenges that you experience in complying with the CoT ECD funding requirements?
- What support do you need from the City of Tshwane to be effective and to comply with the ECD Funding requirements?
- What role should the social workers play in assisting the ECD centres to comply with the ECD funding requirements?

I would like to give you my full attention during the interview(s), and since I might forget some of the valuable information that you will share with me, I would like (with your permission) to audio record the interview(s). After the interview(s), this audio-recording will be written out word-for-word.

After transcription of interviews, all the information that might identify you personally will be removed so that no one will be able to link you to any of the information that you would have shared during the interview(s). The audio- recording will then be erased. Some of the information that you will share will be documented in a research report. However, your name or any personal information will not be revealed, this will make it impossible for anybody to identify you.

Please note that participation in this study is completely voluntary (you are free to participate or not to participate). You are not forced in any way to take part in this

research project. Your decision to participate, or not to participate, will not affect you in any way, now or in future.

If you agree to take part, you still have the right to change your mind at any time during the study and to withdraw from the study.

If I see that the information that you shared has left you feeling emotionally upset or anxious, I am required to refer you to a counsellor for debriefing or counselling (if you agree).

You have the right to ask questions about the study at any time. If you have any questions or concerns about the study; please contact me at 073 824 1744 or my supervisor, Dr. Sesoko, at the Department of Social Work, UNISA.

Please note that for this study to commence, approval will have to be granted by the Research and Ethics Committee of the Department of Social Work at UNISA. Without the approval of the committee, the study cannot be conducted. Should you wish to send questions and queries regarding the approval of this study, please feel free to contact Prof Nicky Alpaslan, the Chairperson of the Research and Ethics Committee of the Department of Social Work at UNISA. His contact details are (012) 429 6739, or email [alpasah@unisa.ac.za](mailto:alpasah@unisa.ac.za)

Alternatively, you can send your queries to the Chairperson, Human Ethics Committee, College of Human Science, PO Box 392, UNISA, 0003.

If you agree to participate in this study, kindly sign the consent form attached hereto.

Thanking you in anticipation.

Yours sincerely

-----

Nomaefese Gatsheni (Researcher)

Mobile: 073 824 1744

Email: [35024062@mylife.unisa.ac.za](mailto:35024062@mylife.unisa.ac.za)



## **7.2. Addendum B: Informed Consent Form (Participants)**

Researcher: Nomaefese Gatsheni

Mobile: 061 582 6735

Email: [35024062@mylife.unisa.ac.za](mailto:35024062@mylife.unisa.ac.za)

**Title of the study: Status of compliance of Mamelodi ECD centres to the City of Tshwane ECD funding strategy: a social work perspective**

### **Goal of the study:**

The goal of the study is to explore the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, Tshwane

### **Objectives of the study:**

- To explore and describe the status of compliance to the CoT ECD funding strategy by the CoT ECDs.
- To describe the findings regarding the status of compliance to the CoT ECD funding strategy by the CoT ECDs.
- To draw conclusions and make recommendations regarding the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, CoT.

**Procedures:** I understand that I will be invited to participate in face to face interviews to explore and describe the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, City of Tshwane. The duration of interview sessions will be approximately 90 minutes per session. I give full consent to the researcher to audio tape the discussions.

**Risks and discomforts:** I take note that there are no foreseen risks and discomfort involved in participating in the study. However, I understand that this research will remind

me of the practical realities and challenges in complying with the CoT ECD funding strategy.

**Benefits:** I understand that the researcher will not offer me any incentives for being involved in the study.

**Participants' rights:** I am fully aware that participation in this study is voluntary and that I may withdraw my participation from the study at any time if I so wish, without negative consequences.

**Confidentiality:** Information shared during the discussion will be treated with the strictest confidence.

**Dissemination of research results:** I also understand that the researcher will compile a research report to be submitted to the University of South Africa for academic purposes and that the research findings will be submitted for publication to a scientific journal. However, I take note that the researcher will ensure that no information that would identify me would be included in the transcriptions, research report and any other further publications. Other than the researcher, I am aware that the researcher's supervisor will have access to the research data and she will treat it as confidential.

**Data reuse:** I give full consent for the reuse of research data for further research.

By signing this letter of consent, I confirm that I have read and clearly understood its contents. I do not give up any legal right by signing this letter of informed consent.

.....	.....	.....
Participant (Print name)	Participant's Signature	Date
.....	.....	.....
Researcher (Print name)	Researcher's Signature	Date

### 7.3. Addendum C: Consent Form Requesting Permission to Publish Information

As part of this project, I will make an audio recording of you. I would like you to indicate (with ticks in the appropriate blocks next to each statement below) what uses of these records you are willing to consent to. This is completely up to you. I will use the records only in ways that you agree to. In any of these records, names will not be identified.	Place a tick [✓] next to the use of the record you consent to
1. The records can be studied by the research team, quotations from the transcripts made of the recordings can be used in the research report.	
2. The quotations from the transcripts made of the recordings can be used for scientific publications.	
3. The written transcripts and / or records can be used by other researchers.	
4. The quotations from the transcripts made from the recordings can be shown / used in public presentations to non-scientific groups.	
5. The records can be used on television or radio interviews.	
<hr/> Signature of participant	<hr/> Date

#### 7.4. Addendum D: Statements and Declarations

##### DECLARATION BY THE RESEARCHER

I, Nomaefese Gatsheni, declare that:

- I have explained the information given in this document to-----  
----- (name of participant);
- He/she was encouraged and given ample time to ask me questions;
- This conversation was conducted in English and no translator was used.

Signed at \_\_\_\_\_ on \_\_\_\_\_ 2017  
(place) (date)

\_\_\_\_\_  
Signature of researcher  
participant

\_\_\_\_\_  
Signature of

##### IMPORTANT MESSAGE TO PARTICIPANT

Dear participant

Thank you for your participation in this study, kindly take note of the following:

- Should an emergency arise as a result of the research, or
- Should you require any further information with regard to the study, or
- If you need to refer someone who is a potential participant for this study,

Kindly contact me, Nomaefese Gatsheni, at cell number, 073 824 1744. Email: [35024062@mylife.unisa.ac.za](mailto:35024062@mylife.unisa.ac.za)

### **7.5. Addendum E: Interview Guide**

- Gender
- Position in the ECD Centre
- Number of Years of Experience in the ECD field
- Year the ECD Centre was established
- Is the ECD centre registered
- Total Number of staff in the ECD centre
- Total number of Children in the ECD centre
- Year in which the ECD was Funded by COT
- Tell me about your experiences related to the CoT ECD Funding Strategy
- What is your understanding of the purpose of the CoT ECD funding strategy and the funding requirements?
- What were some of the needs that you identified and included in your application for funds?
- What compliance issues did social workers share with you as basis for the funding of your ECD centre?
- Tell me more about how you utilized the funds that you received from CoT to benefit your centre?
- What helped you to comply with the CoT ECD funding requirements?
- What made it difficult for you to comply with the CoT ECD funding requirements?
- What human resource challenges did you encounter in complying with the CoT ECD funding strategy and requirements?
- What in your view can be done to address the challenges that you experience in complying with the CoT ECD funding requirements?
- What support do you need from the City of Tshwane to be effective and to comply with the ECD Funding requirements?
- What role should the social workers play in assisting the ECD centres to comply with the ECD funding requirements?

## **7.6. Addendum F: Letter Requesting a Social Worker to Offer De Briefing Sessions to Participants in the Research Project (Social Worker)**

Department of Social Work

University of South Africa

06/01/2017

Dear social worker

**RESEARCH PROJECT ON *STATUS OF COMPLIANCE OF MAMELODI ECD CENTRES TO THE CITY OF TSHWANE ECD FUNDING STRATEGY: A SOCIAL WORK PERSPECTIVE***

My name is Nomaefese Gatsheni, and I am Master of Social Work student of the Department of Social Work, University of South Africa (UNISA). As part of my studies I have to undertake a research project. My research project entails conducting an investigation of the status of compliance to the CoT ECD funding strategy by ECD centres in Mamelodi, City of Tshwane. The rationale for this study is that no study has been done on the topic, in a bid to propose recommendations to review the existing policies on the CoT ECD funding.

Since you are a qualified social worker, I humbly request that I refer participants to you in the event that participants are in need of debriefing sessions. This will occur after the interview sessions so that participants get an opportunity to express emotions and work through their experiences.

Should you agree to this request, I would like to inform you about the different aspects of the study. During the interview(s) participants will be asked the following questions:

- Tell me about your experiences related to the CoT ECD Funding Strategy

- What is your understanding of the purpose of the CoT ECD funding strategy and the funding requirements?
- What were some of the needs that you identified and included in your application for funds?
- What compliance issues did social workers share with you as basis for the funding of your ECD centre?
- Tell me more about how you utilized the funds that you received from CoT to benefit your centre?
- What helped you to comply with the CoT ECD funding requirements?
- What made it difficult for you to comply with the CoT ECD funding requirements?
- What human resource challenges did you encounter in complying with the CoT ECD funding strategy and requirements?
- What in your view can be done to address the challenges that you experience in complying with the CoT ECD funding requirements?
- What support do you need from the City of Tshwane to be effective and to comply with the ECD Funding requirements?
- What role should the social workers play in assisting the ECD centres to comply with the ECD funding requirements?

Should you have any questions or concerns about the study; please contact me at 061 582 6735 or my supervisor, Dr. Sesoko, at the Department of Social Work, UNISA.

Please note that for this study to commence, approval will have to be granted by the Research and Ethics Committee of the Department of Social Work at UNISA. Without the approval of the committee, the study cannot be conducted. Should you wish to send questions and queries regarding the approval of this study, please feel free to contact Prof Nicky Alpaslan, the Chairperson of the Research and Ethics Committee of the Department of Social Work at UNISA. His contact details are (012) 429 6739, or email [alpasah@unisa.ac.za](mailto:alpasah@unisa.ac.za)

Alternatively, you can send your queries to the Chairperson, Human Ethics Committee, College of Human Science, PO Box 392, UNISA, 0003.

Should you agree to offer debriefing sessions to participants involved in this study, kindly sign furnish me with an acceptance letter and your curriculum vitae.

Thanking you in anticipation.

Yours sincerely



-----  
Nomaefese Gatsheni (Researcher)

Mobile: 061 582 6735

Email: [35024062@mylife.unisa.ac.za](mailto:35024062@mylife.unisa.ac.za)



## 7.7. Addendum G: Turnitin Digital Receipt



### Digital Receipt

This receipt acknowledges that Turnitin received your paper. Below you will find the receipt information regarding your submission.

The first page of your submissions is displayed below.

Submission author: Nomaefese Gatsheni  
Assignment title: Research proposal  
Submission title: STATUS OF COMPLIANCE OF MA...  
File name: C:\Users\maleskj\OneDrive - Univer...  
File size: 973.5K  
Page count: 176  
Word count: 48,919  
Character count: 258,031  
Submission date: 23-Sep-2019 11:24AM (UTC+0200)  
Submission ID: 1178180427

STATUS OF COMPLIANCE OF MANELODI ECD CENTRES TO THE CITY OF  
TSHWANE ECD FUNDING STRATEGY: A SOCIAL WORK PERSPECTIVE

NOMAEFESE GATSHENI

Submitted in accordance with the requirement for

the degree of

MASTERS OF ARTS IN SOCIAL SCIENCES IN SOCIAL WORK

at the

UNIVERSITY OF SOUTH AFRICA

SUPERVISOR: DR MP SESOKO

SEPTEMBER 2019

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## 7.8. Addendum H: Editor's Certificate

The Reverend David Swanepoel  
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9 September 2019

TO WHOM IT MAY CONCERN

This is to certify that I have completed the English Editing of the text of a dissertation to be submitted in fulfilment of the requirements for the degree of

**MASTERS OF ARTS IN SOCIAL SCIENCES IN SOCIAL WORK**

at the

**UNIVERSITY OF SOUTH AFRICA**

The dissertation is entitled

**STATUS OF COMPLIANCE OF MAMELODI ECD CENTRES TO THE CITY OF  
TSHWANE ECD FUNDING STRATEGY: A SOCIAL WORK PERSPECTIVE**

by

**NOMAEFESE GATSHENI**


I am qualified to have done such editing, being in possession of a Bachelor's degree in English from Rhodes University, Grahamstown, an Honours Degree in English and HED with English as prime teaching subject from the University of South Africa, and having taught English to Matriculation, First Year University Level, GCSE and A level in both South Africa and the United Kingdom of Great Britain for over 40 years, as well as having been Senior (English) Associate Editor of a national magazine for two years. I have edited Master's Dissertations and Doctoral Theses for several years for several universities and institutions in South Africa and abroad as well as editing documents/papers for publication for various publishing concerns and a number of international academics.

I trust that this declaration is satisfactory.

DAVID JOHN SWANEPOEL



## 7.9. Addendum I: UNISA Department of Social Work Research and Ethics Review Committee Approval Letter

  
UNISA university of south africa

**DEPARTMENT OF SOCIAL WORK RESEARCH AND ETHICS REVIEW  
COMMITTEE**

6 February 2017

Ref#: R&EC: 19/01/17\_35024062\_02  
Name of Applicant: Gatsheni, N  
Student#: 35024062

Dear Mrs Gatsheni

**DECISION: ETHICAL APPROVAL**

---

Name: **Mrs Gatsheni**

Address & contact details: **6 Junction Avenue, Akeso Clinic, Park Town,  
2193**

Contact No: **073 824 1744**

Supervisor: **Dr MP Sesoko**

Title of Proposal: **STATUS OF COMPLIANCE OF MAMELODI ECD  
CENTRES TO THE CITY OF TSHWANE ECD FUNDING STRATEGY: A  
SOCIAL WORK PERSPECTIVE**

Qualification: **Master of Social Work**


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Thank you for the application for research ethics clearance by the Department  
Of Social Work Research And Ethics Review Committee.

The application was reviewed in compliance with the UNISA Policy on  
Research Ethics by the abovementioned Committee at a meeting conducted  
on 19 January 2017.

**Final approval is granted for the duration of the project.**

The proposed research may now commence with the proviso that:

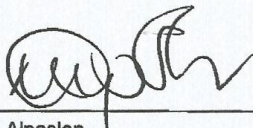
  
University of South Africa  
Pretorius Street, Muckleneuk, Pretoria, City of Tshwane  
PO Box 392 UNISA 0003 South Africa  
Telephone: +27 12 429 3111 Facsimile: +27 429 12 429 4150  
UNISA 1995-2017

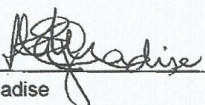
Open Rubric



- 1) The researcher will ensure that the research project adheres to the values and principles expressed in the UNISA Policy on Research Ethics.
- 2) Any adverse circumstance arising in the undertaking of the research project that is relevant to the ethicality of the study, as well as changes in the methodology, should be communicated in writing to the Department of Social Work's Research and Ethics Review Committee. An amended application could be requested of there are substantial changes from the existing proposal, especially if those changes affect any of the study-related risks for the participants.
- 3) The researcher will ensure that the research project adheres to any applicable national legislation, professional codes of conduct, institutional guidelines and scientific standards relevant to the specific field of study.

Kind regards,

Signed by:  Date: 6 February 2017  
Professor AH Alpaslan  
Chair: Department of Social Work Research and Ethics Review Committee  
alpasah@unisa.ac.za

Signed by:  Date: 6 February 2017  
Prof MPJ Madise  
Manager Postgraduate Studies: College of Human Sciences





## 7.10. Addendum J: City of Tshwane Permission to Conduct Research Letter



### City Strategy and Organisational Performance

Room CSP23 | Ground Floor, West Wing, Block D | Tshwane House | 320 Madiba Street | Pretoria | 0002  
PO Box 440 | Pretoria | 0001  
Tel: 012 358 1673 / 082 603 0215 |  
Email: AnishaD@tshwane.gov.za | www.tshwane.gov.za | www.facebook.com/CityOfTshwane

My ref: Research Permission/ Gatsheni  
Contact person: Pearl Maponya  
Section/Unit: Knowledge Management

Tel: 012 358 4559  
Email: [PearlMap3@tshwane.gov.za](mailto:PearlMap3@tshwane.gov.za)

Ms. Nomaefese Gatsheni  
700 Rubenstein Road  
Moreleta Park  
0181

Date: 26 June 2017

Dear Ms. Gatsheni,

#### RE: STATUS COMPLIANCE OF MAMELODI ECD CENTRES TO THE CITY OF TSHWANE ECD FUNDING STRATEGY: A SOCIAL WORK PERSPECTIVE.

Permission is hereby granted to Ms Nomaefese Gatsheni, a candidate of Masters in Social Work at University of South Africa to conduct research in the City of Tshwane Metropolitan Municipality.

It is noted that the research study seeks to understand the status of compliance of Mamelodi Early Childhood Development Centres to the City of Tshwane Early Childhood Development Strategy. The City of Tshwane further notes that all ethical aspects of the research will be covered within the provisions of the University of South Africa Research Ethics Policy. You will be required to sign a confidentiality agreement form with the City of Tshwane prior to conducting research.

Relevant information required for the purpose of the research project will be made available upon request. The City of Tshwane is not liable to cover the costs of the research. Upon completion of the research study, it would be appreciated that the findings in the form of a report and or presentation be shared with the City of Tshwane.

Yours faithfully,

Anisha Dharumrajh (Ms.)

ACTING GROUP HEAD: CITY STRATEGY AND ORGANISATIONAL PERFORMANCE

City Strategy and Organisational Performance • Stadstrategie en Organisasieprestasie • Lefapha la Thutaganyo ya Tiro le Togamano ya Toropokgolo • UmNyango wezokusebenza namaQhinga aHleliweko kaMasipala • Kgoro ya Lemoqokanyo la Toropokgolo le Bodiragatsi bja Mmasipala • Mubasho wa Yhuputani ha Dorobo khulwane na Mashumele • Ndzwulo ya Maqhinga ya Dorobakulu na Matirhele ya Masipala • Umnyango wezeqhinga ledolobha nokusebenza kwesikhungo